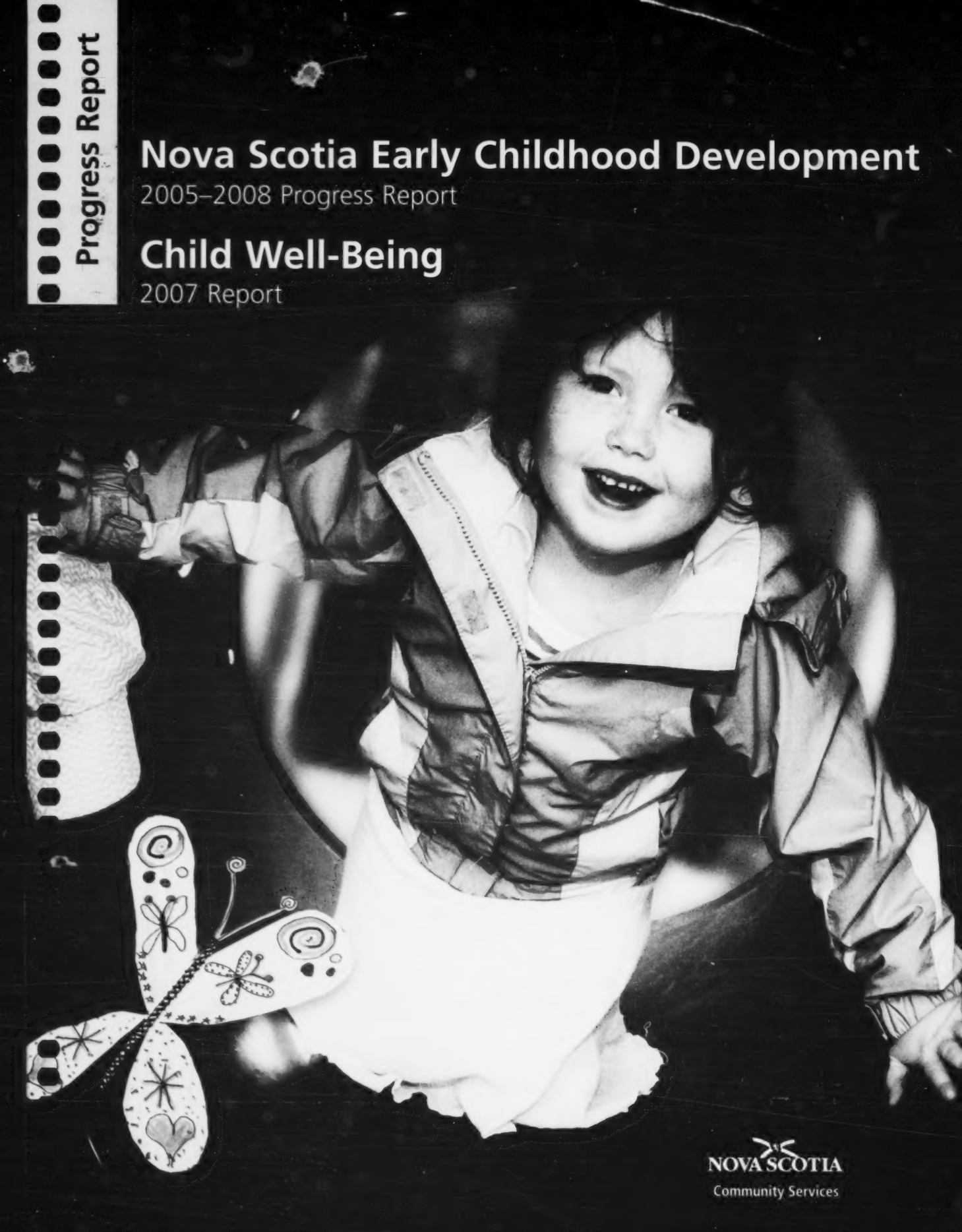
Progress Report

Nova Scotia Early Childhood Development

2005–2008 Progress Report

Child Well-Being

2007 Report



NOVA SCOTIA
Community Services

Nova Scotia Early Childhood Development

2005–2008 Progress Report

Child Well-Being

2007 Report

This document is available on the Internet at http://www.gov.ns.ca/coms/

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Letter from the Minister

It is my pleasure to present Nova Scotia's 2005–2008 Early Childhood Development Progress Report and the 2007 Child Well-Being Report.

In September 2000, federal, provincial and territorial ministers responsible for Social Services established the Early Childhood Development Communiqué to improve and expand early childhood development programs and services. The following four pillars were identified to the provinces as areas for investment:

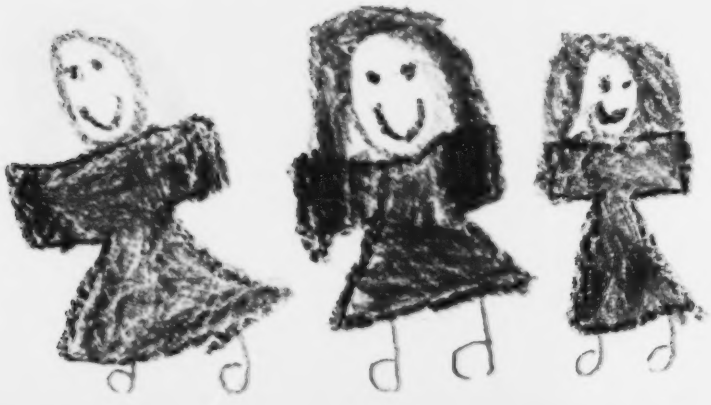
- Promote healthy pregnancy, birth and infancy;
- Improve parenting and family supports;
- Strengthen early childhood development, learning and care; and
- Strengthen community supports.

Fulfilling Nova Scotia's commitment as partners to the Communiqué, the province developed plans to implement the Early Childhood Development Initiative (ECDI). Investments from April 2005 to March 2008 include:

- $10.5 million for Healthy Beginnings: Enhanced Home Visiting program;
- $12.8 million for enhancements to the Child Care Stabilization Grant; and
- $6.9 million for enhancements to the Employment Support and Income Assistance program.

The 2003 Multilateral Framework on Early Learning & Child Care (ELCC) builds on the commitments made as part of the 2000 Communiqué on Early Childhood Development. Investments from April 2005 to March 2008 include:

- $2.8 million for enhancements to the Early Childhood Education Training Initiative;
- $7.6 million for continued investments in the provision of portable subsidized child care spaces; and
- $2.9 million in increases to Supported Child Care Grant funding.



In May 2006, Nova Scotia developed and began the implementation of a 10 year Early Learning and Child Care Plan. Investments made to enhance early learning and child care in the province as part of the Child Care Plan from April 2006 to March 2008 include:

- Approximately $6.3 million in approved funding for the Child Care Operating Grant (CCOG) to provide operational funding for licensed child care centres;
- Approximately $8.5 million for the Repair and Renovation Loan, Program Enhancement Grant and Outdoor Play Space Grant.

The 2007 Child Well-Being Report has also been included in this report, fulfilling our commitment to report to our citizens on the health and well-being of our children. Indicators of well-being for children (as provided by the National Longitudinal Survey of Children and Youth) are provided in the following areas: physical health, early development, safety and security, family and community. Highlights of the report include:

- A slight decrease in the percentage of high birth weight and pre-term birth babies;
- More than 80% of Nova Scotia children scored average or advanced on the Motor and Social Development (MSD) Scale; and
- An increase in educational achievement among parents of young children.

Nova Scotia welcomes and values these federal funding initiatives as they enhance provincial programs and supports for our children and their families. This fourth report, for the year ending March 2008, provides a summary of continuing and expanded early childhood development programs and services within Nova Scotia.

Sincerely,

Hon. Chris d'Entremont
Minister of Community Services

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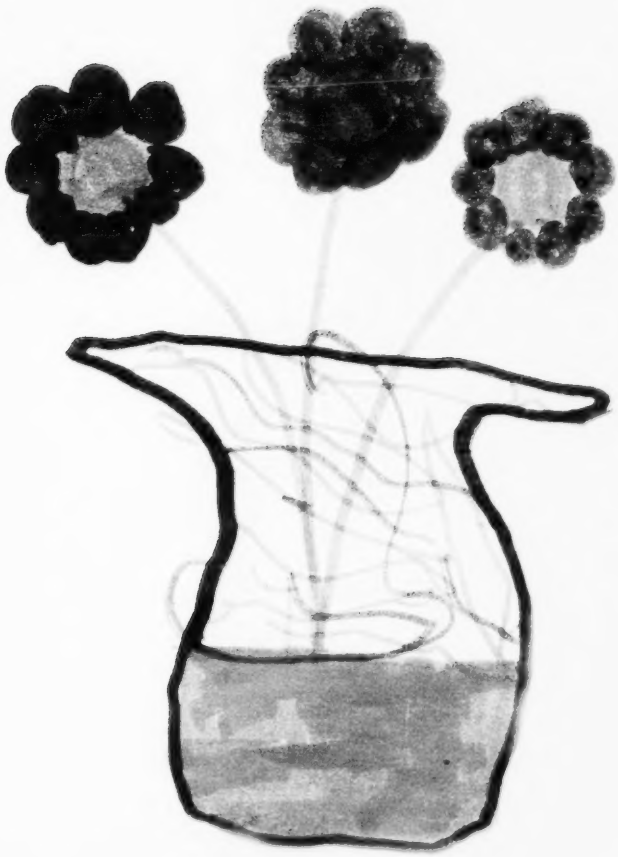


Introduction

The Province of Nova Scotia is pleased to present its Early Childhood Development (ECD) 2005–2008 Progress Report. This fulfills our commitment to report to the public on investments made as part of the 2000 Early Childhood Development Communiqué (ECDI), and the 2003 Multilateral Framework on Early Learning and Childcare (ELCC). As part of the 2005 Early Learning and Child Care Agreement-in-Principle, Nova Scotia has developed a 10-year Early Learning and Child Care Plan. This report includes an overview of investments made to enhance early learning and child care in the province as part of the Early Learning and Child Care Plan.

Federal funding received by the province as part of the ECDI/ELCC was $20,014,000 in 2005–2006; $22,044,575 in 2006–2007; and $19,645,146 in 2007–2008; while federal funding received as part of the ELCC Agreement (Child Care Plan) was $2,147,993 in 2006–2007 and $17,633,917 in 2007–2008. The total investment of federal funds as of March 31st, 2008 is $135,245,165. This represents expenditures incurred from all three federal ECD funding agreements from April 2001–March 2008.

The 2007 Child Well-Being Report included in this report, fulfills our commitment to report to our citizens on the health and well being of our children. Indicators of well being for children (as provided by the National Longitudinal Survey of Children and Youth) are provided in the following areas: physical health, early development, safety and security, family and community.

This report provides an overview of the progress made by the province from April 2005 to March 2008 in four ECD action areas:

- Promote healthy pregnancy, birth and infancy;
- Improve parenting and family supports;
- Strengthen early childhood development, learning and care; and
- Strengthen community supports.

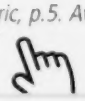
Program information and indicators are provided for each program area (see Addendum: Federal Principles and Program Indicators for further information). An overview of enhancements to early learning and child care as part of the Early Learning and Child Care Plan is also provided.

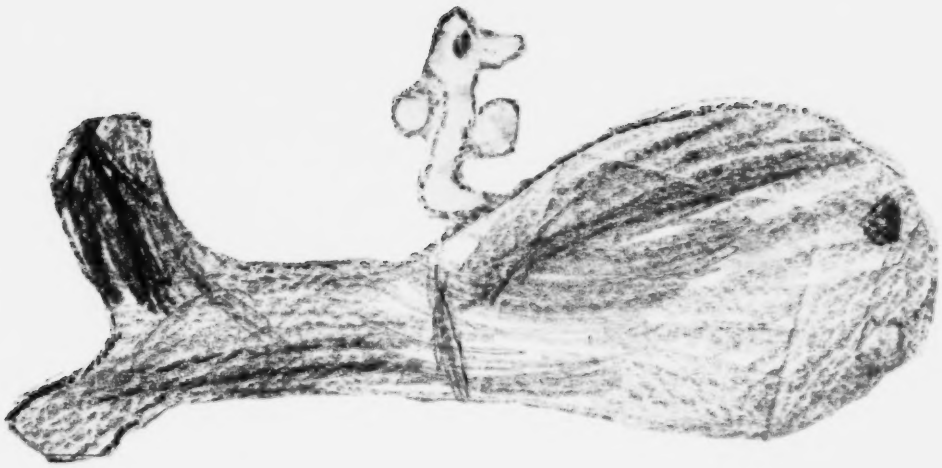
The Province of Nova Scotia has developed programs to support children and their families through educational programs for parents and children, family-centered inclusive programming, employment support and child care subsidies. Nova Scotia's child care sector has also been supported through training initiatives, infrastructure and program enhancement grants. Nova Scotia has developed a Framework for Social Prosperity; the integration of social policy, social sustainability and social prosperity are key elements of this Framework. The programs and initiatives that follow support the Framework's goals of: health, well-being, lifelong learning, access and inclusion, citizenship development engagement, and safety and security. Together these programs and initiatives help build upon and strengthen the foundation of early childhood development services in the Province of Nova Scotia.

Link to NS Framework for Social Prosperity

The ECDI/ELCC initiatives, Early Learning and Child Care Plan and Child Well-Being Report are important threads which help weave together a vision for the 'fabric of our citizen's lives'. The vision of the Framework states that, "…every Nova Scotian has the opportunity to live well and contribute in a meaningful way within a province that is caring, safe and creative—now and into the future".

— Government of Nova Scotia (2007) Weaving the Threads: A Lasting Social Fabric, p.5. Available at: http://www.gov.ns.ca/coms/department/documents/Weaving_the_Threads.pdf





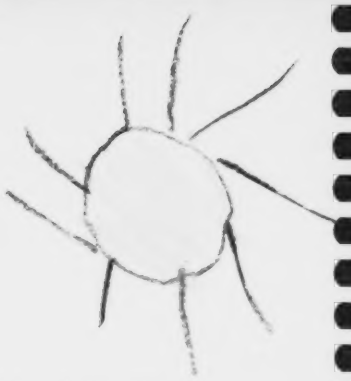
Promote Healthy Pregnancy, Birth and Infancy

Represents Nova Scotia's investment with respect to the First Ministers' Communiqué on Early Childhood Development:

Promote Healthy Pregnancy, Birth and Infancy

Objectives:

- Enable pregnant women, their partners and their families to achieve a healthy pregnancy, optimal birth outcome and positive adaptation to parenting.
- Promote the optimal physical, cognitive, emotional and social development of all children in Nova Scotia
- Enhance the capacity of parents to support healthy child-development
- Enhance the capacity of communities to support healthy child-development
- Contribute to a coordinated, effective system of child-development services and supports for children and their families



Early Childhood Development Initiative funding is provided to the Department of Health Promotion and Protection for Healthy Beginnings: Enhanced Home Visiting. Funding is distributed to the District Health Authorities (Public Health Services) to implement this initiative at the local level. Healthy Beginnings: Enhanced Home Visiting builds on existing programs and services offered by Public Health Services and supports home visiting for families facing challenges for the first three years of their child's life. The enhanced home-visiting program focuses on promoting healthy parent-child relationships, fostering healthy childhood development and linking families with community resources that further enhance opportunities for the healthy growth and development of the child and family as a whole.

Healthy Beginnings: Enhanced Home Visiting

Launch Date:	June 2002		
Funding Source ($):	2005/06 **ECDI**: 3,500,000	2006/07 **ECDI**: 3,500,000	2007/08 **ECDI**: 3,500,000
Target Population:	Families who may benefit from additional support		
Lead Department:	Nova Scotia Department of Health Promotion and Protection		
Delivery Agents:	District Health Authorities (Public Health Services)		
Program Description:	Healthy Beginnings: Enhanced Home Visiting is a voluntary, strengths-based, and family centered home-visiting program offered by Public Health Services. The program builds on the continuum of programs and services offered by Public Health Services to families during pregnancy, post-partum and early childhood.		
Program Goals:	Enable pregnant women, their partners and their families to achieve a healthy pregnancy, optimal birth outcome and positive adaptation to parenting.		
	Promote the optimal level of physical, cognitive, emotional and social development of all children in Nova Scotia.		
	Enhance the capacity of parents to support healthy child development.		
	Enhance the capacity of communities to support healthy child development.		
	Contribute to a coordinated, effective system of child development services and supports for children and their families.		

Program Activities Healthy Beginnings: Enhanced Home Visiting

April 2005 - March 2008

Identifying Program Families: Public Health Services uses a systematic approach (standardized screening and assessment) to identify families who will most benefit from enhanced home visiting and/or additional services.

Strengthening Supports For Families: In February 2006, a decision was made to use a curriculum (Growing Great Kids) as the foundation for home visiting. Provincial training supported community home visitors in the delivery of this curriculum.

Enhancing Quality of Service: Core competencies have been identified for community home visitors to effectively provide home visiting support to families. Core training is held once a year for new community home visitors. To support provincial training capacity, the role of provincial trainer was identified. The mentorship and certification process for the provincial trainer is underway.

Program Evaluation: The development of the Healthy Beginnings: Enhanced Home Visiting provincial evaluation framework was completed in December 2004. The proposed evaluation strategy consists of three phases of data collection – Implementation, Quality Assurance and Outcomes. Evaluation Phase 1 (Implementation) addressed program implementation, determining if the program was being implemented as per provincial program standards. This phase was completed in June 2006.

Evaluation Phase 2 (Quality Assurance) focused on strengths and weaknesses of the program to inform program improvement before moving to outcome evaluation. Phase 2 demonstrated that participating families are very satisfied with the program and parents are reporting positive outcomes for their children and families. Phase 2 was completed in March 2007.

Evaluation Phase 3 (Outcomes for Families) is scheduled to begin in January 2009 and will assess what difference the Healthy Beginnings program has made for families in Nova Scotia and to what extent the program has enhanced parenting capacity and parenting skills among families facing challenges.

Provincial Database: A provincial database to support Healthy Beginnings: Enhanced Home Visiting was launched in April 2006. The database collects data on all families in the province with respect to screening, assessment and enhanced home visiting. Work is underway to improve data quality and develop provincial reports. Version 2 of the Provincial Healthy Beginnings database is expected to be launched in December 2008.

Program Indicators Healthy Beginnings: Enhanced Home Visiting

Investment Period >	2005-06	2006-07	2007-08
Availability			
# of program sites	9 District Health Authorities (DHAs)		
# of births screened	—	—	8,171
% of births screened	—	—	96.2%
# of completed assessments	—	—	333
# of participating families	—	—	664*
Accessibility			
Target population served	Families identified through the screening and in-depth assessment process		
Affordability			
Program cost	Program is free of charge		
Quality			
Improvement in education/ training of service providers	Standardized core training for all community home visitors and their supervisors. Established the role for provincial trainer. Identified role of provincial trainer and began certification process.		
Monitoring of provincial program standards	Ongoing monitoring of provincial program standards for Healthy Beginnings: Enhanced Home Visiting.		
Partnership approach	Healthy Beginnings Teams continue to support implementation of Healthy Beginnings: Enhanced Home Visiting at the local level.		
Data collection	Implementation of the provincial program evaluation. Phase 1 and 2 are complete. Work is underway to use the findings of Phase 2 to inform program improvement before moving to Phase 3 (outcomes) in 2009.		
Program evaluation	Launch of provincial database to support Healthy Beginnings: Enhanced Home Visiting in April 2006. Work is underway on Version 2 of the database to improve data quality.		

*Statistics available as of 2007 - 08

Enhanced Parenting and Family Supports

Represents Nova Scotia's investment with respect to the First Minister's Communiqué on Early Childhood Development:

Improve Parenting and Family Supports

Objectives:

- To promote the healthy development of children.
- To partner with communities in recognizing parents' roles in the healthy development of children.
- To promote the development of children's language and emergent literacy by supporting parents and early childhood educators.
- To increase the opportunity for children to have stable home environments through enhancements to adoption services.

One of the priorities of early childhood development is to provide opportunities for parent education and develop new support networks to meet the needs of both parents and caregivers in the community. A variety of approaches have been used including: Parent Education and Support Grant; Parent Education Strategy; Child Care Information and Support; Early Language and Learning; and Enhanced Domestic Adoption.

Parent Education and Support Grant

Launch Date:	August 2003		
Funding Source ($):	2005/06 **Provincial:** 561,500 **ECDI**: 340,000	2006/07 **Provincial:** 561,500 **ECDI**: 226,000	2007/08 **Provincial:** 561,500 **ECDI**: 206,000
Target Population:	Families across Nova Scotia, particularly those with young children under the age of six seeking to enhance their knowledge, skills and/or supports in their efforts to raise healthy children.		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agents:	Family resource centres		
Program Description:	The Parent Education and Support Grant provides funding to 14 family resource centres (FRC) across the province to enhance their capacity to deliver quality parent education programs. The grants range from $5000 to $30,000 per family resource centre depending on existing capacity and considering equity across the four Nova Scotia Department of Community Services regions.		
Program Goal:	To increase the capacity of family resource centres to deliver quality parent education programs.		
Program Objectives:	Enhance the capacity of family resource centres to deliver quality parent education by increasing: the number of parent education programs being delivered, and the number of parents participating in parent education programs.		
	The grant is also intended to support professional development opportunities for parent educators and to purchase quality materials for parenting programs.		

Early child development and parenting centres are at the core of an integrated framework of activities and supports for the pre-natal period and for children from birth to six years and their families… Programs [that] support the growth and development of parents, prepare the next generation of parenthood and enhance the ability to function as contributing members of society.[2]

[2] McCain, M.N., Mustard, J.F., Shanker, S. (2000) Early Years Study 2: Putting Science into Action, p.138.

Program Activities Parent Education and Support Grant

April 2005 - March 2008

Parent education programs include: *Nobody's Perfect, You Make the Difference, How to Talk So Kids Will Listen, Parenting: A Balancing Act, First Steps Parenting, You're a Better Parent Than You Think, Siblings Without Rivalry and Kids Have Stress Too!, ABCs of Parenting, What a Difference an Hour Makes, Building Blocks to Reading, and Teen Parent Program.*

Additional resource centre program activities include: Parenting support groups; personal development programs in the areas of nutrition, physical fitness, cooking, anger management, leisure, and stress management; programs designed specifically for fathers; parent-child interactive programs such as Parent 'n Tot/Play groups; and professional development opportunities including First Aid/CPR, Good Beginnings and Nobody's Perfect Facilitator training.

Program Indicators Parent Education and Support Grant

Investment Period >	2005-06	2006-07	2007-08
Availability			
# of program sites	14 family resource centres		
# of parents served	2821	2538	3044
# of children served	1666*	1694*	2156*
Accessibility			
Location	Centres are located across the province		
Affordability			
Program cost	Program is free of charge		
Quality			
Improvement in education/ training of service providers	The Parent Education and Support Grant has also been used to support the purchase of parenting resources and program materials, as well as provide parent education opportunities in rural / remote communities		

* Information provided from 12 of 14 family resource centres

Child Care Information and Support

Launch Date:	September 2002		
Funding Source ($):	2005/06 **ECDI**: 650,000	2006/07 **ECDI**: 650,000	2007/08 **ECDI**: 550,000
Target Population:	Parents, caregivers and members of the early childhood sector		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agents:	Non-profit, community-based resource programs with a mandate related to early childhood development.		
Program Description:	Child Care Information and Support (CCIS) grants are provided to 13 community-based non-profit agencies (inclusive of family resource centres) with a mandate related to early childhood development, to enhance and improve the quality and availability of child care for families. There are 14 CCIS sites in total administered by 13 agencies. The CCIS grants range from $25,000 to $100,000.		
	A coordinator with a background in early childhood education and experience in community development is employed by a community-based non-profit resource centre to work within the community to build its capacity to provide a range of quality child care options that respond to local need. CCIS programs collaborate with parents, caregivers and communities in planning, designing, and implementing local initiatives.		
	CCIS programs offer a variety of services to both parents and child care providers. Services to parents may include information and support for choosing quality child care, information on the kinds of child care available in the community, parenting information and workshops, referrals to other programs and services in the community, materials such as pamphlets, newsletters, websites, resource lending and caregiver registries. Services to child care providers may include start-up and operating information, resource lending, networking opportunities, workshops and training and information about providing quality child care.		
Program Goal:	To enhance and improve the quality and accessibility of a range of child care options for families.		
Program Objectives:	Supporting the development of child care that responds to the different needs of families and communities.		
	Providing training, information and support to parents and child care providers.		
	Providing information and education to the public about quality early learning and child care programs.		

Program Activities Child Care Information and Support

April 2005–March 2008

The Provincial Advisory Committee for CCIS was established in 2003 to provide information, support and advice to the CCIS program. This committee continued to meet in 2005 and participated in a committee process review to determine necessary revisions to its Terms of Reference. The tasks outlined in the original Terms of Reference for the committee were completed and members agreed to close the committee in October 2005.

Activities for CCIS programs generally fall into the following categories: parent/caregiver education and support, parent/caregiver-child interactive programming, public/community/professional education activities, consultations, and referrals. Some examples of CCIS programs include: First Aid/ CPR, fire safety, safe food handling, behaviour guidance/positive discipline, development of activity kits, choosing quality child care (packages and information sessions), Family Child Care Training Program/ Good Beginnings, Learning Language and Loving It, resource lending libraries (toys, equipment, books and videos), child care registries, and car seat clinics.

Parent/caregiver-child interactive program activities include: *Mother Goose, Rhyme Time*, playgroups, *Music and Movement* and *You Make the Difference.*

The CCIS programs also participated in a range of public and community education activities and professional development opportunities including expos, conferences, workshops, training programs, and presentations. CCIS programs network extensively with community partners, regional coalitions and multi-agency committees. They have also provided networking opportunities for child care providers and parents.

CCIS coordinators responded to many phone and drop-in inquiries and made referrals to other programs and services in their communities.

Program Indicators Child Care Information and Support

Investment Period >	2005-06	2006-07	2007-08
	Availability		
# of program sites	14 sites administered by 13 agencies		
# of caregivers	Caregiver/Parent, Education and Support Programs: 696 Caregiver/Parent-Child Interactive Programs: 118	Caregiver/Parent, Education and Support Programs: 724 Caregiver/Parent-Child Interactive Programs: 85	Caregiver/Parent, Education and Support Programs: 988 Caregiver/Parent-Child Interactive Programs: 260
# of parents	Caregiver/Parent, Education and Support Programs: 558 Caregiver/Parent-Child Interactive Programs: 228	Caregiver/Parent, Education and Support Programs: 1336 Caregiver/Parent-Child Interactive Programs: 473	Caregiver/Parent, Education and Support Programs: 1250 Caregiver/Parent-Child Interactive Programs: 517
# of children	Caregiver/Parent-Child Interactive Programs: 772	Caregiver/Parent-Child Interactive Programs: 444	Caregiver/Parent-Child Interactive Programs: 1072
	Accessibility		
Locations	Fourteen CCIS sites across Nova Scotia		
	Affordability		
Program cost	Program is free of charge		
	Quality		
Improvement in education/ training of service providers	Activities for CCIS programs generally fall into the following categories: - parent/caregiver education and support - parent/caregiver-child interactive programming - public/community/ professional education activities, consultations and referrals		

Early Language and Learning

Launch Date:	September 2002		
Funding Source ($):	2005/06 **ECDI**: 890,000	2006/07 **ECDI**: 720,000	2007/08 **ECDI**: 617,886
Target Population:	Early Language and Learning is available in 11 family resource centres to families, caregivers and early childhood educators who require additional support in raising healthy children.		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agents:	Family resource centres		
Program Description:	Early Language and Learning (ELL) grants are provided to 11 family resource centres across Nova Scotia to promote children's early language, literacy, and cognitive development. Forty sites and outreach areas deliver ELL programs. One family resource centre in Eastern, Northern and Central regions and two family resource centres in the Western region employ a speech - language pathologist. The speech - language pathologists are shared between the host agency, other ELL-funded family resource centres, and community partners in their regions. The speech-language pathologists, early childhood development practitioners, parents, and communities collaborate to create innovative programs and strategies that promote children's language development during natural activities happening at home, in early learning and child care environments, family resource centres, and other community settings. ELL programs offer a wide variety of services to both parents and early childhood development practitioners. Services to parents may include: parenting programs that support positive parent-child interaction and encourage the social and language development of children naturally in everyday situations; language-enhanced parent-child interactive programs; consultation with parents around activities that will support language and literacy development at home; referrals to other resources in the community; and language-enhanced resource libraries. Services to practitioners may include: training in facilitating children's social and language development in early learning and child care environments and other community settings; program consultation and support; and resources to support language-enhanced programming.		
Program Goal:	To enhance and improve the quality and accessibility of a range of child care options for families.		
Program Objectives:	Encouraging and supporting positive parent-child interactions Providing training, consultation and resources to parents and practitioners Increasing public awareness of the importance of language development in the early years		

Program Activities Early Language and Learning

April 2005 - March 2008

The Provincial Advisory Committee for ELL, which was made up of representation from government, academia and community-based agencies, was established in 2002 to provide information, support and advice to the ELL program. This committee continued to meet in 2005 and participated in a committee process review to determine necessary revisions to the Terms of Reference. The tasks outlined in the original Terms of Reference for the committee were completed and members agreed to close the committee in October 2005.

The principles of the Early Language and Learning program have been integrated into all programs and activities of the funded family resource centres. The priority populations for the ELL program include parents, children (birth to six years of age), early childhood educators and others working with children in early learning environments such as parent educators, home visitors, volunteers, and community partners.

ELL programs have been very successful in reaching priority populations using the following strategies: flexible scheduling of programs and training; collaboration/partnership with other community agencies; providing supports for child care and transportation; offering programs free of charge; providing outreach services to rural/remote communities; distributing newsletters, brochures and monthly calendars to families, practitioners, community agencies and government departments; actively seeking parent input into program development and implementation; and providing materials and resources to families and early childhood development practitioners.

Family resource centres often receive multiple sources of funding to deliver programs and services. ELL funding has been used by family resource centres to create new programs and services, and to enhance existing programs and services through the provision of additional staff hours, employing the expertise of speech-language pathologists, providing increased opportunities for professional development, and additional resources such as program materials, books, videos, equipment and toys.

Activities for ELL programs generally fall into the following categories: parent education and support, parent-child interactive programs, child focused programming, public/community education activities/programs and professional development opportunities. Some examples of this type of programming include: *First Steps Parenting, How to Talk So Kids Will Listen, Kids Have Stress Too!, Nobody's Perfect, Siblings Without Rivalry, You Make the Difference, Parenting for a Literate Community, 1,2,3,4 Parents, Bringing Books to Life, Coffee & Conversation*, home visiting and parent support groups; phone lines and one-on-one communication with family resource centre staff.

Staff of family resource centres with ELL funding hosted/participated in public/community education activities over the course of the year including expos, presentations to community partners/potential partners, celebrations (e.g. National Literacy Day), multi-agency meetings and distribution of promotional materials.

One-on-one communication with families and referrals are a significant and ongoing aspect of the work of staff in family resource centres. Referrals are made to a wide variety of programs and services including early intervention, mental health, libraries, women's centres, transition houses, public health, recreation programs, food banks, clothing rooms, family counseling agencies; as well as other programs offered by family resource centres such as parent education, pre-natal nutrition programs, play groups, and personal development programs.

In keeping with the principle of local collaboration and partnership, some of the organizations involved in the work of Early Language and Learning provided support and training to child care centres in their respective communities. Staff from child care centres participated in formal training such as *'Learning Language and Loving It'* and workshops that addressed ways of supporting language and literacy development in early childhood settings. In some regions, the speech-language pathologists hired through ELL were also available to provide informal consultations to child care centre staff.

Program Indicators Early Language and Learning

Investment Period >	2005-06	2006-07	2007-08
	Availability		
# of program sites	11 family resource centres (40 Sites)		
# of parents/ caregivers	Parent Education and Support: 904 Parent - Child Interactive Programs: 1329	Parent Education and Support: 878 Parent - Child Interactive Programs: 2676	Parent Education and Support: 1061 Parent - Child Interactive Programs: 2021
# of children	Parent - Child Interactive Programs: 2023 Child-Focused Programs: 1005	Parent - Child Interactive Programs: 3653 Child-Focused Programs: 1745	Parent - Child Interactive Programs: 2616 Child-Focused Programs: 1477
	Accessibility		
Location	ELL grants are provided to 11 family resource centres (40 sites) across Nova Scotia		
	Affordability		
Program cost	Program is free of charge		
	Quality		
Improvement in education/ training of service providers	Staff have benefited from an array of professional development opportunities including trainer/facilitator training in *You Make the Difference, Kids Have Stress Too!, Roots of Empathy, Foundational Literacy Training, Story Sacks, Nobody's Perfect, Invest in Kids, Community Home Visitor* training and a number of conferences, workshops, information sessions, and networking events		

Moving Forward 2008/09...

In 2008, project dollars for the Parent Education and Support Grant, Child Care Information and Support and Early Language and Learning were converted into core funding for Family Resource Centres (FRCs) in receipt of these ECDI funds.

This will increase opportunities for FRCs to provide parenting and family support programs and services that are tailored to meet the needs of their respective communities. The following four core service areas were identified for this funding: parent education and learning, family support, child development, and early language and literacy.

Enhanced Domestic Adoption

Launch Date:	October 2003		
Funding Source ($):	2005/06 **ECDI**: 831,899	2006/07 **ECDI**: 928,310	2007/08 **ECDI**: 775,090
Target Population:	Children in permanent care and custody		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agents:	There are 15 district offices and five agencies delivering child welfare services. In addition, there is an office in each region delivering regional resources (adoption and foster care pre-assessment, assessment and training).		
Program Description:	The Department of Community Services recognizes that all children need stability and permanence. All children deserve to grow up in a family of their own. The cost of maintaining children in Permanent Care and Custody for the long term is increasing dramatically, particularly as children grow older. Through the Adoption Project, the domestic adoption program was enhanced to increase the opportunity for these children to have a family of their own. During Phase One of the Project, funding supported the resources to conduct research and complete consultations. In Phase Two of the Project, the funding supported the implementation of enhancements in five key areas: service delivery, standards, legal, information technology, and recruitment and awareness.		
Program Goal:	Increase the number of children in permanent care and custody placed for adoption.		
Program Objectives:	Provide children in permanent care and custody with a family of their own to support their growth into healthy and strong adults. Raise Nova Scotia families' awareness that there are children in Nova Scotia waiting for a family. Work together with agencies and stakeholders to enhance the adoption process.		

Program Activities Enhanced Domestic Adoption

April 2005 - March 2008

Nine social work staff added in four regions of the province to provide Pre-Assessment (basic eligibility screening and applicant training) and Assessment Services to support the Child Welfare Agencies/District Offices.

A Children in Care Manual, was implemented in addition to staff training, to focus on improving case planning for children in care.

Amendments to the *Children and Family Services Act* (CFSA) were proclaimed to reduce access as a barrier to adoption and promote openness in adoption and eliminate agency involvement in relative and step-parent adoptions, which allow agencies to focus on the adoption of Children in Care.

A new web-based Adoption Exchange has been implemented for internal use by Child Welfare Agencies/Offices to feature special needs children waiting for adoption placement and to facilitate matching.

An Adoption Awareness and Recruitment Campaign was developed and delivered in November 2005, 2006, and 2007 respectively, resulting in an increase in the awareness of the children in Permanent Care and Custody waiting for adoption and the recruitment of adoptive families to adopt these children.

Program Indicators Enhanced Domestic Adoption

Investment Period >	2005-06	2006-07	2007-08
Availability			
# of program sites	4 Regional Offices • 15 District Offices • 5 Child Welfare Agencies		
# of clients served	103 previous adoptions granted	801 inquiries processed	652 inquiries processed
	116 new children placed for adoption	284 persons completed pre-service training	380 persons completed pre-service training
		238 home studies completed	219 home studies completed
		87 matches / adoption placements	105 matches / adoption placements
		101 adoptions granted	73 adoptions granted
		315 persons attended information sessions	
Accessibility			
Increase in % of target population served (since previous year)	37% increase in number of adoptions of children in care granted	22% increase in number of persons completing pre-service training	48% increase in number of persons completing pre-service training
		50% increase in the number of home studies begun	
		45.8% increase in number of new home studies approved	
Affordability			
Program cost	Program is free of charge		
Quality			
Improvement in education/ training of service providers	Completed Core Training for Adoption Staff	SAFE home study training refresher for supervisors	Parent Resources for Information Development and Education (PRIDE) Pre-service training
	Structured Analysis Family Evaluation (SAFE) training standardized adoption assessment tools	Adoption Manual Training	

Investment Period >	2005-06	2006-07	2007-08
	Quality		
Improvement in education / training of applicants	Implemented new curriculum and mandatory training for adoptive applicants	Delivery of mandatory information sessions and pre-service training for adoptive applicants	Continued delivery of mandatory information sessions
			Implemented and delivered PRIDE pre-service training for both adoptive and foster applicants
Improvements in standards/best practices	Amendments to *Children and Family Services Act* proclaimed	Implementation of new Adoption Manual	
	Implemented SAFE mode of family assessment		
	Developed new Adoption Manual		
Improvements in service delivery	Implemented ten new adoption program positions to deliver provincial general inquiries line, regional basic screening/ eligibility, information sessions, training of applicants and completion of assessments of applicants	Targets established for the completion of pre-service training, adoption home study assessments and placement of children in care	Substantial progress in meeting adoption targets
	Implemented streamlining of adoption administrative processes		
Recruitment and awareness	Launched Adoption Recruitment and Awareness Campaign during November 2005 – Adoption Month	Adoption Recruitment and Awareness Campaign during November 2006 – Adoption Month	Adoption Recruitment and Awareness Campaign during November 2007 - Adoption Month
Improvements in information technology	Improved the Community Services web page on adoption services	Implementation of adoption statistical reports	
	Development of adoption statistical reports	Implemented web based adoption exchange	

Stabilizing and Enhancing Child Care

Represents Nova Scotia's investment with respect to the First Minister's Communiqué on Early Childhood Development:

Strengthen Early Childhood Development, Learning and Care

Objectives:

- To promote the healthy development of children under six years of age by supporting and developing quality early learning and child care programs in Nova Scotia.
- To stabilize and enhance the quality of licensed child care.
- To support parents who need child care while they work or attend school or training programs by providing subsidies to offset the cost of licensed child care.
- To promote inclusion of infants and young children in community-based child care programs and staff training to best meet the needs of children with varying abilities.
- To enhance and improve the quality and accessibility of a range of child care options for families in both rural and urban areas of Nova Scotia.
- To further assist early childhood educators with opportunities for training, and access to information and support on child-related matters.

There are different types of care a parent may choose for their child. Child care licensed under the authority of the *Day Care Act and Regulations* includes child care facilities and family home day care agencies. Trained early childhood educators are key to the provision of programs provided to licensed facilities. The province of Nova Scotia has implemented a variety of approaches to promote the stabilization and enhancement of child care which include: Early Childhood Education Training Initiative; Nova Scotia Child Care Stabilization Grant; Child Care Subsidy Program; Supported Child Care/ Partnerships for Inclusion; Employment Support and Income Assistance Child Care.

Early Childhood Education Training Initiative

Launch Date:	November 2002		
Funding Source ($):	2005/06 **ELCC**: 994,000	2006/07 **ELCC**: 1,000,000 **Child Care Plan**: 98,000	2007/08 **ELCC**: 800,000
Target Population:	Students entering the field and those enrolled in early childhood education programs and members of the current early childhood workforce.		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agents:	Educational institutions and associated programs		
Program Description:	The Early Childhood Development Initiative's Early Childhood Education Training Initiative provides opportunities for early childhood education pre-service and in-service training to educational institutions and associated programs. Additionally, bursaries have been made available to students enrolled in a full-time or part-time two-year early childhood education diploma program.		
Program Goal:	To enhance knowledge and expertise of early childhood students and staff via the delivery of pre-service/in-service training in an accessible, affordable manner.		
Program Objectives:	To enhance the level of training of early childhood educators.		
	To provide training opportunities to support continuous professional development.		
	To support and retain child care staff currently working in the field.		
	To attract and train new professionals into the early childhood field.		

"Investment in individuals, families and communities will enable a healthy, thriving, prosperous Nova Scotia". [3]

[3] Government of Nova Scotia (June 2008) Poverty Reduction Working Group Report, p.20

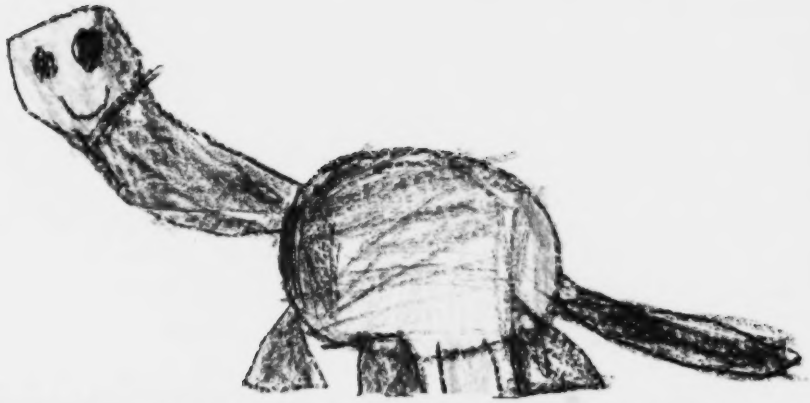
Program Activities Early Childhood Education Training Initiative

April 2005 - March 2008

The programs which have been funded to deliver training and services to the early childhood development sector are: Le Centre provincial de ressources prescolaires (CPRPS); Mount Saint Vincent University (MSVU); the Institute for Human Services Education (IHSE); Nova Scotia Community College (NSCC - Burridge, Kingstec and Cumberland Campuses) and St. Joseph's College of Early Childhood Education (as of 2009, Nova Scotia College of Early Childhood Education). Some of these services include: academic, employment and counseling services to support the pre-service community; the maintenance and enhancement of six Early Childhood Education Training Institution Support Sites which provide high quality resources and tools for pre-service and in-service professionals; accessible and affordable training and professional development opportunities offered on-line and in regional locations; in-centre mentoring and program support services as well as opportunities for centre directors to network.

Program Indicators Early Childhood Education Training Initiative

Investment Period >	2005-06	2006-07	2007-08
	Availability and Accessibility		
# of program sites	6 Early Childhood Development Resource Centre support sites		
	3 Early Childhood Education (ECE) Diploma awarding programs located at 5 different sites plus part time delivery in regional locations.		
	1 Bachelor of Applied Arts (Child and Youth Study) degree program		
# of clients served	Professional Development (PD) workshop participants: 2114	Professional development (PD) workshop participants: 2864	Professional development (PD) workshop participants: 2505
Supporting extended and distance education, and flexible hours of operation	Evening & weekend delivery		
	PD workshops in regional locations		
	PD Workshops: 84	PD Workshops: 105	PD Workshops: 92
	Affordability		
Program cost	Bursaries provided to 188 students enrolled in ECE diploma programs	Bursaries provided to 171 students enrolled in ECE diploma programs	Bursaries provided to 211 students enrolled in ECE diploma programs
	Quality		
Enhancements to training and support	Raise the level of training of early childhood educators (ECEs) by providing training opportunities to support continuous professional development		
	35 Students have completed Prior Learning and Assessment Reviews (PLAR) at the degree and diploma levels		
Compensation	Some centres provide financial compensation to staff to increase training levels, attained through diploma study or professional development opportunities		
Recruitment and retention	New and enhanced professional development training opportunities help attract and retain professionals in the early childhood field		
	Enrollment in ECE diploma programs: Full-time students: 107 Part-time students: 67	Enrollment in ECE diploma programs: Full-time students: 162 Part-time students: 67	Enrollment in ECE diploma programs: Full-time students: 172 Part-time students: 40
	Enrollment in ECE degree programs: 294 students	Enrollment in ECE degree programs: 286 students	Enrollment in ECE degree programs: 248 students
	Based on information received from ECE degree granting and diploma institutions.		
Physical environment; Health & safety; and Learning environment	Early childhood pre- and in-service training and professional development opportunities enhance the knowledge and expertise of staff to improve the early childhood environment, and to foster children's well-being and healthy development		
	Inclusive		
Special needs programming and supports	A focus of some professional development workshops includes programming information to further support the inclusion of children with special needs		
Linguistically appropriate resources and training	Le Centre provincial de ressources prescolaires offers translation services as well as on-going training and professional development opportunities to Acadian and Francophone early childhood educators throughout the province		



Nova Scotia Child Care Stabilization Grant

Launch Date: November 2001

Funding Source ($):

2005/06	2006/07	2007/08
ECDI/ELCC: 4,029,166	**ECDI/ELCC**: 4,263,137	**ECDI/ELCC**: 4,500,000
		Child Care Plan: 491,090

Target Population: Early childhood staff working in full-day licensed child care facilities

Lead Department: Nova Scotia Department of Community Services

Delivery Agents: Full-day licensed child care facilities

Program Description: The purpose of the Nova Scotia Child Care Stabilization Grant program is the provision of funding to full-day child care facilities to support the wages, benefits and training of child care staff.

Program Goal: Increased recruitment and retention of early childhood educators.

Program Objectives: To stabilize the child care work force in Nova Scotia by recognizing the important role that trained staff plays in supporting the healthy development of children. Better wages and benefits will contribute to attracting and keeping qualified child care staff.

To improve the wages and benefits of all eligible staff. The Nova Scotia Child Care Stabilization Grant program helps reduce some of the difficulties associated with attracting and keeping qualified early childhood educators in Nova Scotia by contributing funding to full-day child care facilities.

The Nova Scotia Child Care Stabilization Grant program assists in addressing the issues of recruitment and retention of early childhood educators in Nova Scotia.

Program Activities Nova Scotia Child Care Stabilization Grant

April 2005 - March 2008

Stabilization Grant funding was enhanced in January 2008 with an additional funding amount retroactive to September 2007. To improve wages and assist in attracting/retaining quality staff, funding amounts were increased as follows: $4,500/yr per degree/diploma staff, $4,200 /yr per equivalent staff, and $1,200/yr per untrained staff according to staff: child ratios in regulation. A minimum of 80% of the Stabilization Grant funding must be spent on salaries; while 20% may be spent on benefits and professional development for early childhood educators.

Program Indicators Nova Scotia Child Care Stabilization Grant

Investment Period >	2005-06	2006-07	2007-08
	Availability		
# of program sites	224 licensed full day facilities	230 licensed full day facilities	242 licensed full day facilities
# of clients served	Full-Time Equivalent (FTE): ECE staff: 828 Equivalent: 215 Untrained: 133	Full-Time Equivalent (FTE): ECE staff: 875 Equivalent: 212 Untrained: 146	Full-Time Equivalent (FTE): ECE staff: 906 Equivalent: 226 Untrained: 180
	Percentage of ECE staff: 70%	Percentage of ECE staff: 71%	Percentage of ECE staff: 69%
	Percentage of Equivalent staff: 18%	Percentage of Equivalent staff: 17%	Percentage of Equivalent staff: 17%
	Accessibility		
Increase in % of target population served (since previous year)	There was an increase of 4.5% in full-time staff that received the Grant (1,125 full-time staff received the grant in 04/05)	There was an increase of 4.8% in full-time staff that received the Grant	There was an increase of 6.4% in full-time staff that received Grant
	There was a 3% increase in the number of full-day facilities that received the Grant (217 in 04/05)	There was a 2.7% increase in the number of full-day facilities that received the Grant	There was a 5.2% increase in the number of full-day facilities that received the Grant
	Affordability		
Enhancement to staff wages	The Grant provides a wage increment to early childhood staff in full-day licensed child care facilities		
	Quality		
Improvement in education/ training of service providers	Licensed child care centres may portion a percentage (20%) of the grant to assist with training/professional development costs and benefits.		

Child Care Subsidy Program

Launch Date: Early 1970s, Child Care Subsidy Program
July 2000, Portable Subsidy

Funding Source ($):

2005/06	2006/07	2007/08
Provincial: 7,713,525	**Provincial:** 7,201,572	**Provincial:** 7,174,308
ECDI/ELCC: 2,395,366	**ECDI/ELCC:** 2,577,935	**ECDI/ELCC:** 2,634,992
	Child Care Plan: 342,713	**Child Care Plan:** 1,142,000

Target Population: Low-income families

Lead Department: Nova Scotia Department of Community Services

Delivery Agents: Nova Scotia Department of Community Services

Program Description: The Child Care Subsidy Program has been in place in the Province of Nova Scotia since the early 1970s. The purpose of the Subsidy Program is to provide financial assistance to low-income families while they take steps to increase their self-sufficiency through work, training or education. Low-income families in crisis or whose children have unique developmental needs are also assisted through the Child Care Subsidy Program. Eligibility for subsidy is based on four criteria: social need, financial assets, family income and residency.

The Child Care Subsidy Program provides portable subsidies and regular or fixed subsidy spaces. Portable subsidy is attached to the child and may relocate with the family as needed. The primary stipulation is that the centre to which a parent transfers is eligible to receive portable subsidy. Any licensed, full-day child care centre in the province that has signed the Portable Subsidized Child Care Spaces Funding Agreement may care for a child whose parent is in receipt of a portable subsidy. Regular or fixed subsidized spaces are assigned to specific child care centres and family home agencies.

Until July 2000, subsidized child care spaces were assigned to specific centres. Federal expenditures have increased with announcements relating to additional portable subsidized spaces.

Program Goal: To assist low-income families with their child care expenses to enable them to work, pursue employment, attend school, cope with family crisis, or to assist families whose children have unique developmental needs.

Program Objectives: Provide as many eligible, low-income families as possible with a child care subsidy for their children. Promote the healthy development of children from infancy to 12 years by providing eligible families with financial assistance that enables them to enroll their children in licensed child care facilities and family home day care agencies.

Program Activities Child Care Subsidy Program

April 2005 - March 2008

- Added 380 new subsidies
- Undertook a review of income eligibility guidelines in 2007/08
- Program Enhancements were launched April 1, 2008

Program Indicators Child Care Subsidy Program

Investment Period >	2005-06	2006-07	2007-08
	Availability and Accessibility		
Increase in number of subsidies	130 subsidies 200 subsidies carried forward from 2004-05	150 subsidies	100 subsidies
Total Subsidy cases active	3229	3286	3470
Total children subsidized (portable or regular)	4101	4138	4392
Subsidy utilization rate	76.3%	78.6%	84.56 %
	Affordability		
Enhanced Fee Subsidies that take into account parents' ability to pay and operational funding	—	—	Undertook a review of the income eligibility guidelines. Enhancements launched in 2008/2009.
	Inclusive and Parental Choice		
Flexible approaches that address a range of family and employment circumstances	The child care subsidy serves families whose children have unique developmental needs or who are in crisis.		Conversion of 390 regular subsidies to portable to enable more families to access licensed child care.

Supported Child Care

Launch Date: April 2001

Funding Source ($):

2005/06	2006/07	2007/08
Provincial: 1,452,092	**Provincial:** 1,452,092	**Provincial:** 1,452,092
ECDI/ELCC: 880,861	**ECDI/ELCC:** 903,695	**ECDI/ELCC:** 1,091,899

Target Population: Licensed child care centres, early childhood educators, and children with special needs

Lead Department: Nova Scotia Department of Community Services

Delivery Agents: Nova Scotia Department of Community Services

Program Description: The Supported Child Care (SCC) funding is available to all licensed, centre-based child care programs that are in compliance with the *Day Care Act and Regulations*. SCC funding assists child care centres to include and accommodate children with special needs. Because all child care programs have diverse needs, SCC funding may be used in a variety of ways, including the purchasing of materials, equipment or resources that will assist with the process of inclusion, the provision of specialized training to increase the skill set of staff, and the hiring of additional early childhood educators to enhance ratios for the program.

Program Goal: To build the capacity of licensed child care centres to provide quality inclusive programs for children with special needs.

Program Objectives: To facilitate the inclusion of children with special developmental needs in licensed child care programs throughout the province.

To ensure that families have access to licensed child care in their own communities regardless of their child's developmental needs.

Program Activities Supported Child Care

April 2005 - March 2008

During 2007/08, in conjunction with the Early Learning and Child Care Plan, revisions to the funding process for Supported Child Care were underway. In April 2008, the Supported Child Care Grant commenced, with implementation of the initial components of the revised supported Child Care Grant. Implementation is planned for 2009–10.

Program Indicators Supported Child Care

Investment Period >	2005-06	2006-07	2007-08
		Availability and Accessibility	
# of program sites	132	133	141
# of children served	479 (approx.*)	490 (approx.*)	550 (approx.*)
Parent information & support	Summary Supported Child Care (SCC) document provided to families	Summary SCC document provided to families in addition to a brochure on quality/inclusive child care	Information available on Community Services website
		Quality	
Enhancements to training and support, training requirements	Upon request, workshops provided to the early childhood sector and utilization feedback provided to post-secondary institutions		
	Additional training and support provided to centres through programs such as Building Blocks Strategies for Inclusion		Training session provided in conjunction with the Department of Health (DoH) regarding Early Intensive Behaviour Intervention (EIBI) – Pivotal Response Treatment regarding children with Autism
Child/ care giver ratios and group size	Providing an enhanced staff-child ratio (98% of centres used funding to hire additional staff)		
Physical environment	Consultative support provided to ensure the physical environment is conducive to the inclusion of children with special needs.		Early Learning and Child Care Plan: - Repair/Renovation loan supported increased accessibility - Expansion and Outdoor Play Space grants provided the opportunity to increase accessibility to indoor/ outdoor play spaces
Health and Safety	Annual licensing inspections and monitoring visits. Centres must be in compliance with the *Day Care Act and Regulations*		

*Data does not capture all children with special needs attending Licensed Child Care

Program Indicators Supported Child Care continued from p. 37

Investment Period >	2005-06	2006-07	2007-08
		Quality	
Learning environment	Early Childhood Development Officers (ECDOs) work with centres to encourage the consideration of quality indicators for child care programming when planning to include children with special needs. An evaluation of the child care program using the Early Childhood Environment Rating Scale-Revised (ECERS-R) can be used to identify current quality measures within the program and to plan future goals. The ECERS-R scale addresses issues of ratios and supervision within several items; the evaluation tool identifies 43 areas within the early childhood environment and evaluates them on a scale of 1 to 7 (inadequate to excellent). Most items on the ECERS-R scale have a health and safety component and specifically address the learning environment.		
		Inclusive	
Special needs programming and supports	Building Blocks Strategies for Inclusion workshops were provided (100 sector staff) participated	Building Blocks Strategies for Inclusion (participation of 119 sector staff)	Building Blocks Strategies for Inclusion (participation of 83 sector staff)
Linguistically appropriate resources and training	Funding provided to allow centres to enhance existing speech and language resources and to fund staff to attend Early Language and Learning workshops.		ELCC Program Enhancement Grant
		Parental Choice	
Innovative approaches to service provision in rural and remote communities	A collaborative effort was initiated between ECDOs, facilitators of the Partnerships for Inclusion project and Early Intervention Programs to provide maximum support to centres to successfully include children with special needs	*Early Intensive Behaviour Intervention (EIBI) program facilitators began working with ECDO's, sector staff, and the Early Interventionist (EIBI program via DoH) for children with Autism	Roles & responsibilities document developed for EIBI, sector staff , ECDO's and early intervention staff; provincial meetings held with these stakeholders to support the collaboration process
Flexible approaches that address a range of family and employment circumstances	ECDO's assist centres in developing *Routine Based Plans to support children with special needs in the context of the daily routine.		

Partnerships for Inclusion

Launch Date: January 2003

Funding Source ($):

2005/06	2006/07	2007/08
ELCC: 350,079	**ELCC:** 350,079	**ELCC:** 350,079

Target Population: Licensed child care centres, early childhood educators, and children with special needs

Lead Department: Nova Scotia Department of Community Services

Delivery Agents: Early Intervention Association of Nova Scotia (EINS); SpeciaLink: The National Centre for Child Care Inclusion; and University of Guelph.

Program Description: Partnerships for Inclusion (PFI) is a project of the Early Intervention Association of Nova Scotia (EINS) in association with SpeciaLink: the National Centre for Child Care Inclusion. The goal of this project is to support the inclusion of children with special needs in licensed child care centres in Nova Scotia through a quality enhancement process.

High quality child care provides the foundation for high quality inclusive practices in early childhood environments. PFI has six Inclusion Facilitators who work throughout the province of Nova Scotia. They serve licensed child care facilities in Truro/Northern, Halifax/South Shore, Dartmouth/Valley, and Western Nova Scotia. As well, in 2007/08, the project contracted a French facilitator to work with francophone centres in the Western region of the province. To date, 130 licensed child care centres have participated in the process of quality enhancement.

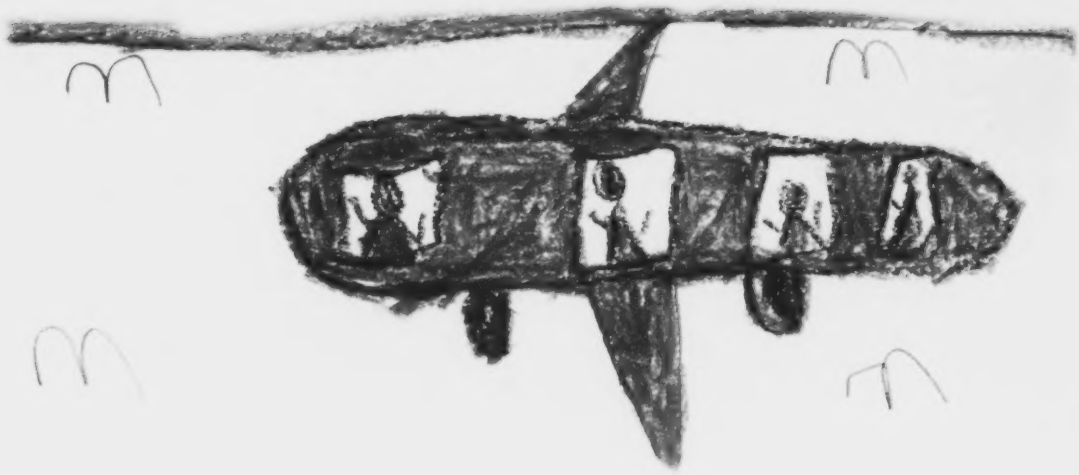
Using the Early Childhood Environment Rating Scale – Revised (ECERS-R) and the SpeciaLink Inclusion Practices Profile and Principles Scale, Inclusion Facilitators evaluate quality and inclusion in early childhood environments. Facilitators then provide on-site support, resources, and professional development to motivate change within the child care centre which results in higher quality inclusive programs for young children.

Program Objectives: To develop high quality early childhood environments in Nova Scotia that meet the needs of all children.

To support the inclusion of children with special needs by enhancing the quality of early childhood environments through a process of on-site consultation.

To evaluate the baseline quality of early childhood environments and the inclusion practices of early childhood programs, using evidence-based measurement tools, such as ECERS-R and the SpeciaLink Inclusion Principles and Inclusion Practices Scales, in each participating centre.

To provide on-site consultation through the provision of resources, materials and professional development for staff in participating child care centres in order to support them in meeting inclusion/quality goals.



Program Activities Partnerships for Inclusion

April 2005 – March 2008

Throughout the process of on-site consultation and quality enhancement, Inclusion Facilitators work with centre staff to address issues specific to the inclusion of children with special needs in programs. The SpeciaLink Inclusion Practice and Inclusion Principles Scales are completed through interviews with staff and observation of the child care environment.

Inclusion Facilitators work with centres to address issues such as accessibility, resources and materials for children with special needs, staff training in the area of inclusion, partnerships with families and professionals, involvement of goal setting for children with special needs in group care, full participation of children with special needs at their own level of development, developmentally appropriate programming for all children, transition to school, and advocacy for high quality, community-based inclusive child care.

During 2005/06 PFI facilitators completed the ECERS-R to determine if centres were able to sustain or exceed baseline scores. Social Development Canada funded the development of an evaluation framework to be used by the governments of Canada and Nova Scotia. The framework probed evaluation strategies to assess the effectiveness of the design and delivery of PFI. *PFI-Nova Scotia 'An Evaluation Based on the First Cohort of Child Care Centres* (Lero, D.S., Irwin, S.H. & Daris, T.) was released in January 2006.

During 2006-07, a 'Special Literacy Project' was developed to identify, purchase and distribute children's books that represent diversity to all child care centres who had, or where currently participating in PFI.

In April 2008, the five year PFI research project ended; a final report titled *'Improving Quality, Enhancing Inclusion: Partnerships for Inclusion – Nova Scotia'* (Lero, D.S & Irwin, S.H.) was released. Many of the recommendations contained within this report were implemented as part of the development of the Supported Child Care Grant (SCC) and the Early Learning and Child Care Plan. In addition, a Leadership Forum was also held for 50 child care directors who participated in PFI and whose child care facilities sustained high scores on the ECERS-R.

Program Indicators Partnerships for Inclusion

Investment Period >	2005-06	2006-07	2007-08
	Availability and Accessibility		
# of program sites	27 child care centres	28 child care centres	24 Child care centres
Change in socio-demographic profile of the client population	Three francophone centres are participating in the project. A French facilitator has been hired in order to work with these centres.		
Supporting extended and flexible hours of operation	The project supports staff in centres as they work to better meet the needs of the families they serve. Providing flexible hours of care for families of children with special needs is addressed.		
Parent information & support	Parent meetings and workshops provide information in many areas related to child development, including quality in early childhood environments, common behaviour concerns with young children, why children learn best through play, and inclusion in early childhood environments.		
	Affordability		
Program cost	Program is free of charge		
	Quality		
Enhancements to training and support, training requirements	Professional development for early childhood educators (ECEs) is provided on-site as well as to the larger ECE community in partnership with Nova Scotia Community College ECE programs. On-site training is "tailor made" to meet the needs of each centre.		
Child/care giver ratios & group size	The program addresses the importance of maintaining appropriate ratios at all times. The ECERS-R scale addresses issues of ratios and supervision within several items. The program also addresses issues of group size and required supports in relation to inclusion of children with special needs in all group activities. Reduced or enhanced ratios support the inclusion of children with special needs.		
Recruitment and retention	High quality programs address the personal and professional needs of the staff as well as children and families. The ECERS-R evaluation tool notes this as an indicator. Centres who address this indicator are better positioned to successfully include children with special needs.		
Physical environment	The ECERS-R evaluation tool identifies 43 areas within the early childhood environment and evaluates them on a scale of 1 to 7 (inadequate to excellent). The Inclusion Scales evaluate the environment based on high quality inclusive practices. Facilitators work with staff to identify priorities and goals for the centre in relation to quality enhancement. Facilitators provide support, resources, materials, and professional development to help child care centres achieve their program goals.		
Health & safety	Enhancement/improvement of the early childhood environment results in a safer and healthier environment. Most items on the ECERS-R scale have a health and safety component.		
Learning environment	The curriculum and learning environment are focused on the process of quality enhancement. Facilitators provide training and resources on the latest research in child centered care and developmentally appropriate practice. Many areas of the ECERS-R scale specifically address the learning environment. The Inclusion Scales address the development of appropriate programming for children with special needs, including individual planning, working with families and consultants, and making the transition to school.		

Program Indicators Partnerships for Inclusion continued from p. 41

Investment Period >	2005-06	2006-07	2007-08
		Inclusive	
Special needs programming and supports	This project focuses specifically on the inclusion of children with special needs in relation to quality of early childhood environments. Facilitators work with centres to support the inclusion of children presently in programs, but also build upon a centre's capacity to include children with diverse needs. Facilitators also work with Early Childhood Development Officers (ECDO's) to support centres. Facilitators support or develop linkages and partnerships with others in the community such as speech language pathologists, schools, early intervention programs, and other organizations that work to meet the needs of children with special needs and their families. In addition, facilitators work with early interventionists and early childhood educators to support Early Intensive Behaviour Intervention (EIBI) for young children (under six years of age) with autistic spectrum disorder (ASD). EIBI is a coordinated, family centered model in which families and young children receive support from professionals based on a 'pivotal response' treatment model. This model involves direct support from a treatment team (autism supervisor, clinical support worker, speech language pathologist), and may include other professionals. Parental training is also provided.		
Linguistically appropriate resources and training	Through collaboration with the New Brunswick project, *Opening the Door to Quality*, access to training and materials in French is provided. Three French centres are presently participating in the project. Linguistically appropriate resources and training are provided as requested by these centres.		
		Parental Choice	
Innovative approaches to service provision in rural and remote communities	By building capacity in centres to include children with diverse needs, opportunities are created for children with special needs to attend child care centres in their own communities. Participating centres are more willing to include children with special needs because of increased awareness of the support available and resources they can access. Centres have also become more creative in recognizing and meeting the needs of all children.	PFI Facilitators traveled across the regions of the province (Truro/Northern, Halifax/ South Shore, Dartmouth/ Valley, and Western) in order to ensure that all areas were supported as part of the PFI process.	
Flexible approaches that address a range of family and employment circumstances	In addressing issues such as "same hours of attendance" for children with special needs, centres have developed strategies for meeting the needs of families of children with special needs.		

Employment Support and Income Assistance Child Care

Launch Date:	August 2001		
Funding Source ($):	2005/06 **Provincial:** $2,580,358 **ECDI:** $2,300,000	2006/07 **Provincial:** $2,059,969 **ECDI:** $2,300,000	2007/08 **Provincial:** $1,810,842 **ECDI:** $2,300,000
Target Population:	Employment Support and Income Assistance recipients		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agent:	Nova Scotia Department of Community Services		
Program Description:	The Employment Support and Income Assistance (ESIA) program provides income assistance and employment supports to persons in need and assists in maximizing their level of self-sufficiency by helping families to increase their employability and level of independence.		
Program Goal:	To assist Employment Support and Income Assistance recipients with child care expenses in their move towards employability and self-sufficiency.		
Program Objectives:	To provide financial assistance for basic necessities such as food, clothing, shelter, items of special need, child care, and employment supports to assist individuals and families in their move towards self-sufficiency.		

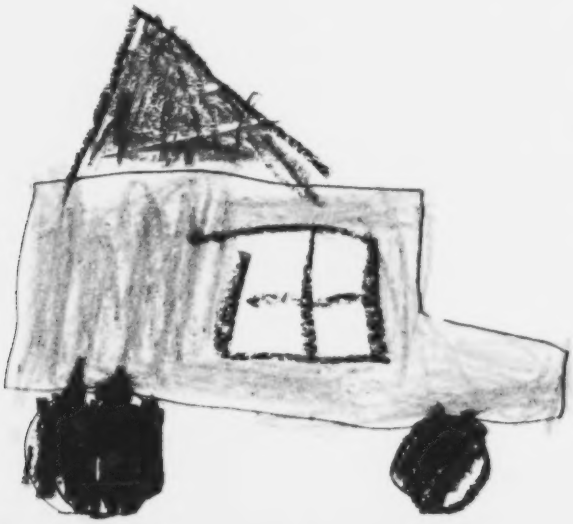
Program Activities Employment Support and Income Assistance Child Care

April 2005 – March 2008

The Department of Community Services is currently developing initiatives to strengthen the system of employment and income supports for those most in need. These initiatives will begin to help reduce poverty, particularly among women and children, and improve the standard of living of Nova Scotians struggling on low incomes. A multi-year Poverty Reduction Strategy is in development which will include an inventory of all current government programs and services that support low-income groups.

Program Indicators Employment Support and Income Assistance Child Care

Investment Period >	2005-06	2006-07	2007-08
	Availability		
# of clients served	Monthly average: 1,505 families were provided with child care assistance.	Monthly average: 1,354 families were provided with child care assistance.	Monthly average: 1,291 families were provided with child care assistance.
	Accessibility		
Increase in % of target population served (since previous year)	The Income Assistance caseload continues to present a downward trend in the number of persons and families requiring assistance and services.		
	There has been a 5% decrease in the number (85) of families requesting funds through the Income Assistance Program to cover child care expenses (1,590 families per month served in 2004/05).	There has been a 10% decrease in the number (151) of families requesting funds through the Income Assistance Program to cover child care expenses (1,505 families per month served in 2005/06).	There has been a 10% decrease in the number (63) of families requesting funds through the Income Assistance Program to cover child care expenses (1,354 families per month served in 2006/07).
Change in the socio-demographic profile of the client population	The ESIA target population is aging and has increasing multiple barriers.		
	Affordability		
Program cost	The ESIA program provides funds to eligible families to assist in the cost of child care services.		
	Quality		
Parental choice	Individual participants are given the opportunity to determine their child care providers.		



Community Engagement and Infrastructure Support

Represents Nova Scotia's investment with respect to the First Minister's Communiqué on Early Childhood Development:

Strengthen Community Supports

Objectives:

- To promote the development of healthy children
- To engage communities in planning and to promote the collaboration and integration of existing and new early childhood development services at the local level
- To promote evidence-based decision-making through the development of accurate and timely information
- To engage communities in ownership and investment in early childhood development
- To report on early childhood development to ensure accountability

One of the major goals of the Early Childhood Development Initiative is to create an integrated system in Nova Scotia that builds on existing programs, seeks out innovative opportunities and establishes the supports for sustainability and growth. At the same time, it allows the region and community to create a system that is flexible enough to serve unique community needs while simultaneously ensuring integrated and seamless service delivery.

The Community Engagement and Infrastructure Support Initiative provides for the development of an integrated early childhood development system with the implementation of the activities identified below: Early Childhood Development Regional Collaboration Teams; ECD Information System and Reporting; and Website Enhancements: Child Care Connections Nova Scotia.

Early Childhood Development Regional Collaboration Teams

Launch Date:	2003		
Funding Source ($):	2005/06 **ECDI:** 3,444	2006/07 **ECDI:** 2,722	2007/08 **ECDI:** 1,703
Target Population:	Families with children from birth to six years of age		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agent:	Community-based agencies and services, and government departments		
Program Description:	The Early Childhood Development Regional Collaboration Teams (RCTs) are groups of individuals representing a variety of government departments and community-based agencies with a mandate to serve children from birth to six years of age and their families. Each of the four Nova Scotia Department of Community Services regions organized a Regional Collaboration Team to develop a plan to establish a comprehensive system of supports for children from birth to six years of age; all but one of the regions still have active RCTs.		
	The RCTs have been involved in the creation of an early childhood development system in their respective regions. A standard Terms of Reference document provides the framework for the work of the RCTs.		
Program Goal:	Early Childhood Development Regional Collaboration Teams will develop strategic plans that will lead to a comprehensive system of supports for children from birth to six years of age.		
Program Objectives:	Review and update the region's environmental scan on services for young children and their families.		
	Enhance cooperation, collaboration, and where appropriate, integration of services.		
	Develop protocols for information sharing and referrals amongst service providers.		
	Identify needs, trends and gaps in existing programs and services.		
	Develop a 3-5 year strategic plan.		

Program Activities Early Childhood Development Regional Collaboration Teams

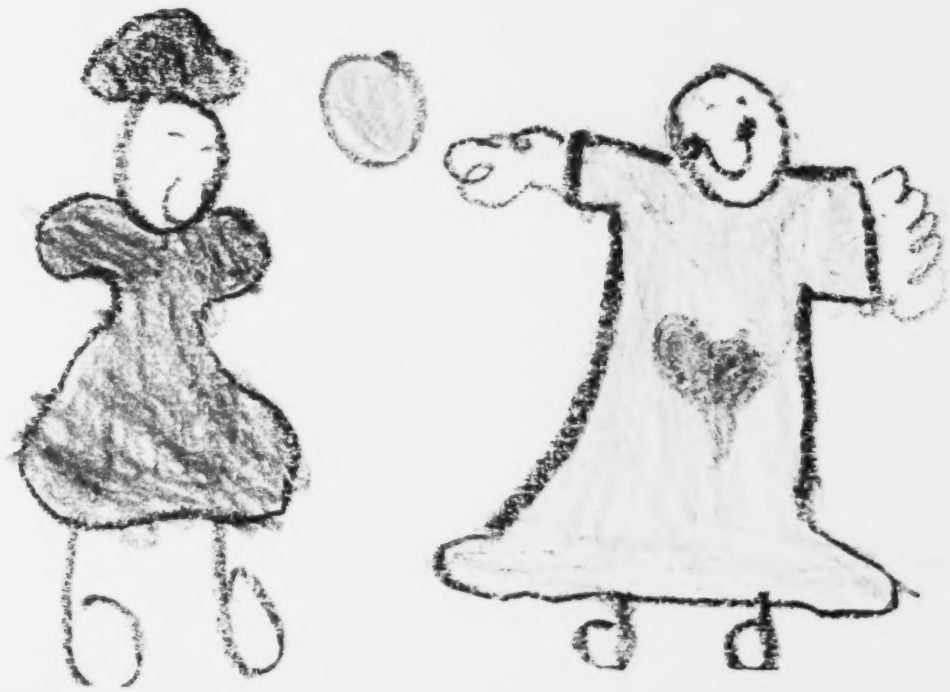
April 2005 - March 2008

During 2005/06 RCT activities included: refining structure and membership; information sharing; team-building; conducting environmental scans of programs and services for young children and their families; identifying the trends and gaps in existing programs and services; participating in visioning exercises; conducting Strengths, Weaknesses, Opportunities, Threats (SWOT) analyses; and identifying goals.

In 2005/06, the RCTs began establishing priorities and developing action plans and continued to increase linkages between new and existing services, facilitating cooperation and collaboration amongst partners and developing protocols for information sharing and referrals.

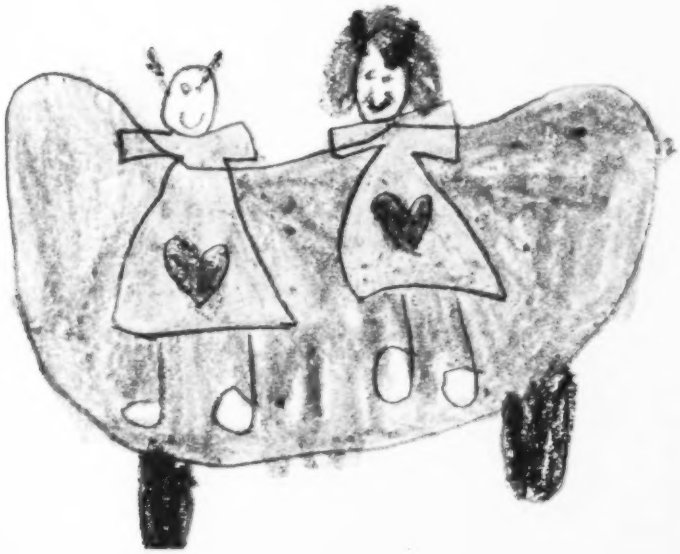
During 2006/07 RCT activities included: development of strategic plans; organized presentations and information sessions for partners in respective regions; and organized regional events for National Child Day.

During 2007/08 RCT activities included: expansion of membership to broaden representation from other services that support early childhood development (e.g., family violence, education, public libraries, Healthy Beginnings, etc.); mapping of resources, trends and gaps in programs, supports and services for children and families within respective regions; prioritization of gaps; developed plans to address gaps through collaborative partnerships; organized parenting workshops for the general public; organized presentations and information session for partners; updated work plan for 2007-2008; completed evaluation of family-centered guidelines and promoted a Family-Centered Practice approach; visioning sessions to work on developing new direction and vision; and one RCT hosted an Early Years Conference.



Program Indicators Early Childhood Development Regional Collaboration Teams

Investment Period >	2005-06	2006-07	2007-08
	Availability		
# of program sites	4 regional collaboration teams (1 in each region: western, central, northern, eastern)	4 regional collaboration teams (1 in each region: western, central, northern, eastern)	3 regional collaboration teams (1 in each region: western, northern, eastern)
	Accessibility		
Increase in the percentage of the target population served	Increased linkages between new and existing services	Organized presentations and information sessions for partners	Expansion of membership to broaden representation from other services that support early childhood development
	Affordability		
Program cost	Program is free of charge.		
	Quality		
Increase in education/ training	Facilitated cooperation and collaboration between partners Developed protocols for information sharing and referrals	Organized National Child Day event Advisory Committee for Child Care Information and Support and Early Language and Learning Programs	Development of resource maps, trends and gaps in program resources Organized parenting workshops for the general public



Early Childhood Development Information System and Reporting

Launch Date:	October 2002		
Funding Source ($):	2005/06 **ECDI:** 995,735	2006/07 **ECDI:** 686,492 **Child Care Plan:** 520,000	2007/08 **ECDI:** 423,994 **Child Care Plan:** 1,500,000
Primary Stakeholders:	Early childhood programs and facilities		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agent:	Nova Scotia Department of Community Services		
Program Description:	The Early Childhood Development Information System consists of five integrated modules and a Reports module: • Child Care Licensing • Child Care Subsidy/Supported Child Care Applications • Child Care Centre Claims/Payments • Grant Allocations/Payments • System Administration		
Program Goal:	To provide an integrated information system that will enable staff to have cross-functional access to data and will provide clients with a heightened level of efficiency in service delivery.		
Program Objectives:	The Early Childhood Development Services Information System was developed as an integrated system, providing cross-functional access to data, efficient processing of funding, timely access to information and the ability to respond to inquiries in an effective manner.		

Program Activities Early Childhood Development Information System and Reporting

April 2005 - March 2008

Modifications to the Child Care Licensing module related to the implementation of the Family Home Day Care Regulation.

Modifications to the Grant Allocations/Payments module related to the following new funding initiatives:

- Outdoor Play Space Grant
- Program Enhancement Grant
- Child Care Operating Grant

Development of, and IT linkages with, the Department of Community Services mortgage/loan systems related to:

- Repair and Renovation Loans
- Expansion and Replacement Loans

Modifications to the IT component of the Child Care Subsidy program related to revised subsidy applications; implementation of revised subsidy per diem rates; development of a revised family income eligibility scale (implemented April 2008); and modifications to Child Care Subsidy Caseworker IT processes in order to calculate revised family eligibility rates.

Activities include: ongoing development of, and updates to, the Community Services website related to applications and information pertaining to all grant/loan programs, Child Care Subsidy Applications and detailed information pertaining to the Child Care Subsidy program, available on the Community Services website; development and implementation of the Directory of Licensed Child Care Facilities website (providing information to families regarding the licensing status of childcare facilities and family home day care agencies); an online mailbox for questions, feedback and comments; and continued development of the IT system in order to enable enhanced data collection opportunities and system administration.

Funding has been allocated to enable the acquisition of external consultants to provide the following services and/ or assist with:

- Project/Portfolio Management
- Change Management
- Benefits Management
- Policy Development
- Business Process Improvement

Program Indicators Early Childhood Development Information System and Reporting

Investment Period >	2005-06	2006-07	2007-08
Availability & Accessibility			
Program access and availability	For staff, the ECD Information System provides timely access to information.	Website enhancements enable information (e.g. subsidy application forms, Frequently Asked Questions (FAQs)) to be readily accessible.	The online Directory of Licensed Child Care Facilities provides information on the licensing status of child care centres and family home day care agencies.
Affordability			
Program cost	Program is free of charge		
Quality			
Improvement in service provision	The ECD Information System provides cross-functional access to data for reports, and a range of information supporting informed decision-making.		
	Improvements to the website by the provision of accessible information for members of the early childhood sector.		

Website Enhancements: Child Care Connections Nova Scotia

Launch Date:	August 2005		
Funding Source ($):	2005/06 **ECDI/ ELCC:** 7,000	2006/07 **ECDI/ ELCC:** 7,000	2007/08 **ECDI/ ELCC:** 7,000
Target Population:	Early childhood sector and parents seeking child care		
Lead Department:	Nova Scotia Department of Community Services		
Delivery Agent:	Child Care Connections Nova Scotia		
Program Description:	Child Care Connections Nova Scotia (CCCNS) is a non-profit community-based development organization. CCCNS has developed an infrastructure to provide support and resources to early childhood practitioners and others interested in quality care in Nova Scotia.		
Program Goal:	To connect child care practitioners, organizations and other interested individuals with information, resources, support and promotion of quality child care.		
Program Objectives:	A coordinated early childhood community that maximizes resources.		
	Increased access to current information relating to best practice in early childhood education and child development.		
	An enhanced public image of the early childhood profession.		

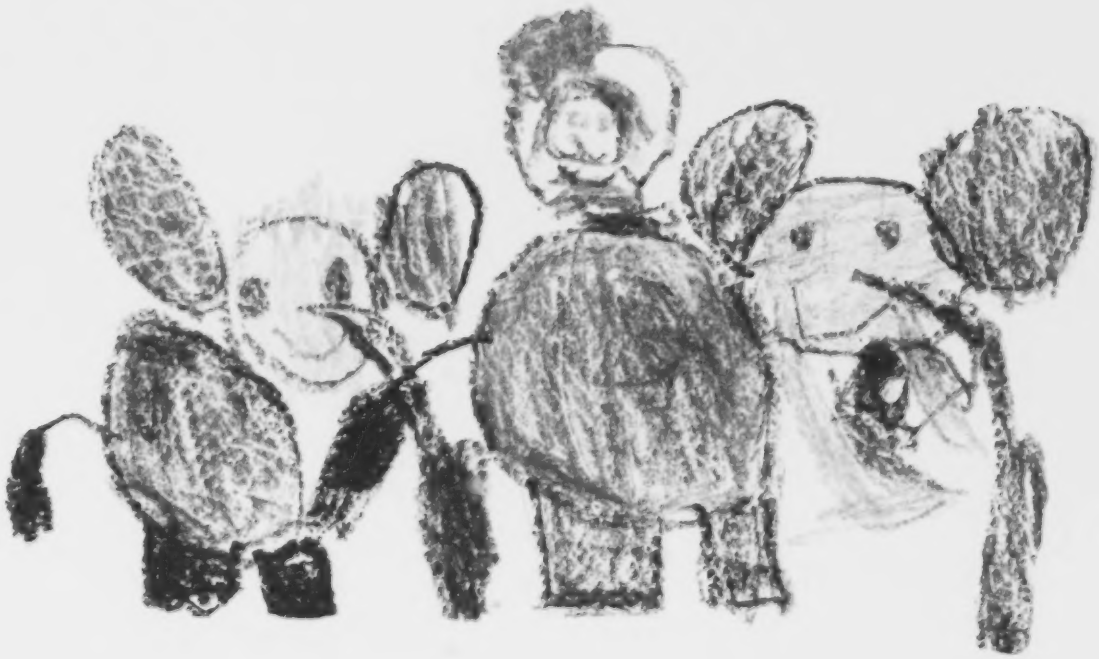
Program Activities Website Enhancements: Child Care Connections Nova Scotia

April 2005 – March 2008

- Ongoing program support
- Enhancements continue to the CCCNS website (http://www.cccns.org)

Program Indicators Website Enhancements: Child Care Connections Nova Scotia

Investment Period >	2005-06	2006-07	2007-08
Availability & Accessibility			
Program access and availability	Website provides 24 hour access to pertinent child care information.		
Affordability			
Program cost	Program is free of charge.		
Quality			
Improvement in service provision	Website provides online resources in the area of quality and inclusion.		
Inclusive, Parental Choice			
Flexible approaches that address a range of family and employment circumstances	Parents and guardians looking for licensed child care in Nova Scotia can acquire information related to the provision of child care.		



Nova Scotia's Early Learning and Child Care Plan

As part of the ECDI (2001) and the ELCC (2003) funding, Nova Scotia has invested in enhancements to the quality, accessibility, inclusiveness and availability of early childhood development programs and services throughout the province. In 2005, additional federal funding was committed as part of the Early Learning and Child Care Agreement-in-Principle, to further support national strategic investments in early learning and childcare initiatives. As part of the ELCC Agreement-in-Principle Trust funding, Nova Scotia received $39.1 million.

In May 2006, Nova Scotia released a comprehensive 10-year Early Learning and Child Care Plan. The focus of the Child Care Plan is to increase the number of child care spaces and subsidies; and to continue to provide support to the child care sector. The Plan has been developed based on consultations with stakeholders; written surveys (collected from the child care sector and parent groups); and comments received through a provincial toll-free child care line, email and surface mail. During Fall 2005, over 2,600 participants informed the consultation process. Information gathered from these consultations helped form the framework of the ELCC Plan.

The following consultation themes emerged from participant responses: decreasing the cost of child care for families; increasing the salary of early childhood educators; providing more accessible child care choices for parents of children with special needs; and increasing the operational grant funding to child care.

In 2007, the Agreement-in-Principle was replaced by the Child Care Spaces Initiative. In 2007/08, Nova Scotia received $7.1 million as part of the Child Care Spaces Initiative. The priority areas identified by the Child Care Plan consultations and investments are highlighted in the pages to follow.

Priority Area Checklist

The following priority areas were identified through consultations with stakeholders (in Fall 2005). Actions taken by the province to address these priority areas as of March 31, 2008 are identified below.

Priority Area	Action
Increase salaries for early childhood educators	• Enhancements to NS Child Care Stabilization Grant • Implementation of Child Care Operating Grant (CCOG)
Decrease the cost of child care for families	• Increased the number of portable child care subsidies • Undertook review of income eligibility guidelines for Child Care Subsidy. Program Enhancements included: increased income eligibility and decreased assessed daily parent fees (launched April 1, 2008).
Increase the operational grant funding to licensed facilities	• Increased operational grant funding through implementation of the Child Care Operating Grant (CCOG); provided other funding inclusive of Program Enhancement Grant, Outdoor Play Space Grant, and Energy Upgrade Grant
Recruit and retain a stable child care workforce	• Enhancements to NS Child Care Stabilization Grant • Implementation of Child Care Operating Grant (CCOG) • Development of the Early Childhood Education Assistance Program which provides financial assistance to the early childhood sector (launched April 1st, 2008) • Development of the Continuing Education Program for Child Care Staff which provides reimbursement for continuing education courses to eligible staff working in licensed child care centers or family home day care (FHDC) agencies (launched June 1st, 2008)
Increase opportunities for training/professional development in early childhood education	• Provision of early childhood pre- and in-service professional development workshops and increased access to early childhood development support sites • Provision of funding to the Nova Scotia Community College to enable the further development of the online delivery of the Early Childhood Studies diploma program
Provide more accessible child care choices for parents of children with special needs	• Increase in Supported Child Care Funding, enhancing inclusive environments; and increases to the number of children served
Increase the number of child care spaces in licensed child care centres	• Approximately 500 new child care spaces were created via the Child Care Expansion and Replacement Loan
Increase information/education for parents about early childhood development and the benefits of child care for their children	• Launched identity sticker symbols for licensed child care centres and approved family day care homes • Directory of Licensed Child Care Facilities, http://www.gov.ns.ca/coms/families/childcare/directories/FacilitySearch.aspx • ELCC Website Mailbox: ELCC@gov.ns.ca • Information posted on the Department of Community Services website: http://www.gov.ns.ca/coms/families/index.html
Increase the number of spaces in licensed family home child care	• Launch of Family Home Day Care Program
Increase awareness of the Nova Scotia Day Care Act and Regulations	• Consultation on new Family Home Regulations • Consultation on the Amendments to the Day Care Regulations

The following investments are linked to the Early Learning and Child Care Plan priorities:

Priority Area • Increase the number of spaces in Licensed Family Home Child Care

Action • Development of Family Home Day Care

The Plan launched a new **Family Home Day Care (FHDC)** program in Nova Scotia to give parents the option of a regulated child care service in a monitored home setting to ensure that children's health, safety and well-being are protected. The program provides parents with access to fee assistance through the subsidy program and supports parents who are employed or training for employment. As of March 31, 2008 there were:

- 3 FHDC agencies and 37 child care providers

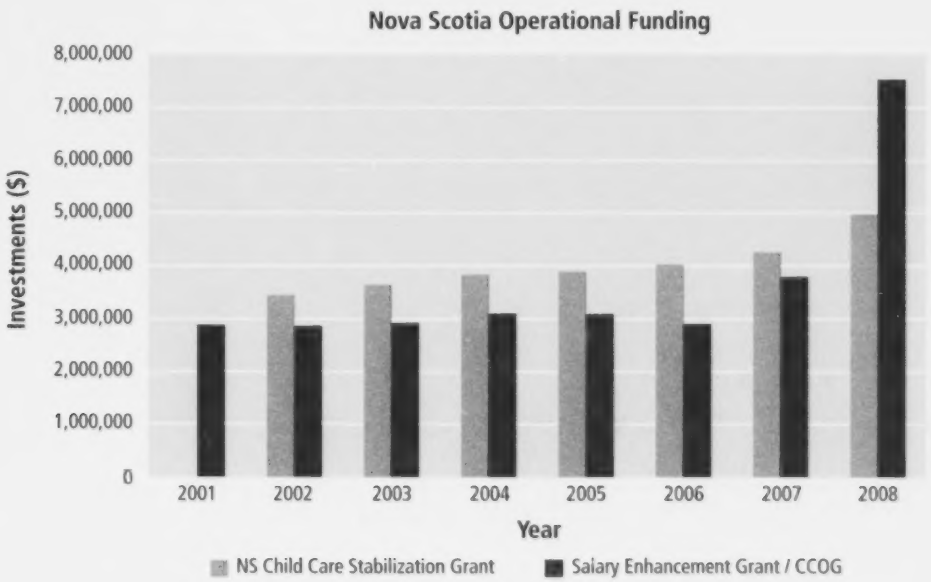
Priority Area • Increase the operational grant funding to child care

Action • Provided operational funding to child care facilities

The Plan provided annual funding to child care centres in the form of a **Child Care Operating Grant (CCOG)**, which was launched in 2007. The primary purpose of the Grant is to: promote the enhancement of salary and benefits of staff of child care centres, to aid in the retention and recruitment of staff, and to assist with other operational child care centre expenses. Total approved funding from the ELCC Plan is approximately $8.1 million. During 2007/08:

- 243 full-day centres received CCOG funding
- 87 part-day centres received CCOG funding

The following graph depicts Nova Scotia's investment in operational grant funding for licensed child care centres, as of March 31st of each year indicated.



Salary Enhancement Grant (SEG) funding began in 2001; in 2007 and 2008 the portion previously allocated as part of the SEG was included as part of the Child Care Operating Grant (CCOG). Funding for the Nova Scotia Childcare Stabilization Grant began in 2002.Total investments in SEG and CCOG from April 1st 2001 – March 31st 2008 were: $29,758,470; while total Stabilization Grant funding was $28,111,261.

Priority Area
- Increase salaries for early childhood educators
- Recruit and retain a stable child care workforce
- Increase opportunities for training/professional development in early childhood education

Action
- Development of an early childhood education workforce strategy to support the recruitment, retention, training and professional development of the child care sector

The Plan funded the development of a Recruitment & Retention Strategy which will respond to current and future requirements to recruit, and retain staff to work in licensed child care. The strategy will lay the foundation of a quality early learning and child care system with qualified and dedicated child care staff as foundational components.

As part of the plan, the following initiatives have been developed:

- Early Childhood Education Assistance Program. This program will provide a debt reduction incentive to eligible Early Childhood Education graduates who successfully complete an ECE diploma/degree program from an approved ECE training program. This new program is also intended to enhance the ability of licensed child care centres and Family Home Day Care (FHDC) agencies to recruit and retain staff by providing financial support to individuals interested in pursuing a career in Early Childhood Education (ECE). Launched April 1, 2008.

- Continuing Education Program for Child Care Staff. This program will enhance the ability of licensed child care centres and family home day care agencies to recruit and retain staff. The program will provide financial support to child care staff to continue their education, enhance their skills and qualifications. This program will also assist individuals interested in attaining an Early Childhood Education (ECE) credential part-time while working in licensed child care. The program will provide reimbursement for continuing education courses to eligible staff working in licensed child care centers or family home day care (FHDC) agencies. Launched June 1, 2008.

Link to NS Framework for Social Prosperity

Investments in the salaries, benefits and training of child care staff in early childhood development is one of the threads which contribute to the economic prosperity of the province and is an important factor in the health and well-being of families and children. Investments in the early childhood sector will reap benefits not only for families, but for society as a whole. Research has shown that, "…knowledgeable responsive early childhood professionals are essential to programs that are sensitive to the needs of young children and their families. Skilled staff are supported by pre-and in-service training in early child development and parenting supports; environments that encourage responsive, individualized attention to children and parents, and compensation levels that reflect the value of the work".

—McCain, M.N., Mustard, J.F., Shanker, S. (2000) Early Years Study 2: Putting Science into Action, p.141.

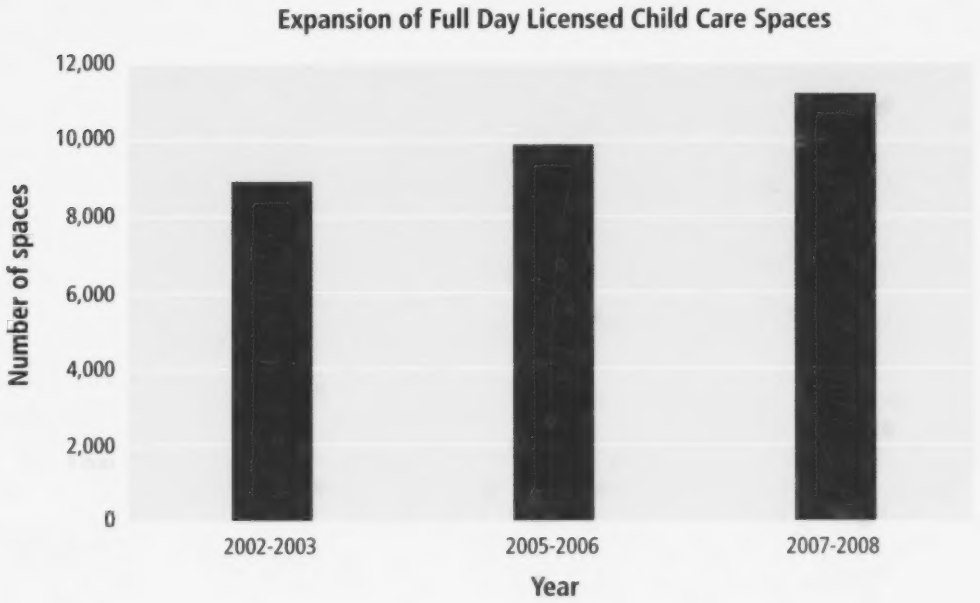
Priority Area • Increase the number of child care spaces in licensed child care centres

Action • Creation of new licensed spaces

The Plan provided financial assistance to both commercial and non-profit licensed child care centres as part of the Expansion and Replacement Loan program. This program was launched during 2007/08 to enable child care centres to expand their space capacity through access to low interest loans. The program received a total of approximately $4 million in approved funding. As part of this funding:

- 17 centres were approved for Expansion and Replacement Loan funding
- An increase of approximately 500 new child care spaces was approved

The following chart illustrates Nova Scotia's expansion of full day licensed spaces in child care centres between April 1st, 2002 and March 31st, 2008.



Link to NS Framework for Social Prosperity

Access to full-day licensed child care spaces demonstrates the Province's commitment to the safety and security of our children, in addition to the health and well-being of children and their families. Offering both full-day and part-day spaces enables parents to make childcare choices which reflect their needs; and also supports their return to the workplace. Work-life balance is very important to the health of our families and our economy, as "true prosperity comes when economic, social, and environmental systems work in coordination and consensus".

—Opportunities for Sustainable Prosperity: An Updated Economic Growth Strategy for Nova Scotia (2006), NS Department of Economic and Rural Development, p. 14.

Priority Area • Provide more accessible child care choices for parents of children with special needs

Action • Increased funding to support the inclusion of children with special needs in licensed child care facilities

The Plan funded an increase in Supported Child Care funding in order to facilitate the creation of inclusive child care programs for children with special needs and provide a stable base of funding to licensed child care centres.

Priority Area • Decrease the cost of child care for families

Action • Creation of Additional Child Care Subsidies

The Plan funded additional child care subsidies to further assist low income families with their child care expenses and to enable them to work, pursue employment, attend school, cope with family crisis and/or provide for their children who have special developmental needs. As part of the plan, fixed subsidies were converted to portable subsidies allowing families greater flexibility to move from one centre or region to another and access licensed child care. For the period April 1st, 2005 – March 31st, 2008:

- 380 new child care subsidies were added
- 389 fixed child care subsidies were converted to portable subsidies

Priority Area • Increase Information/Education for Parents about Early Childhood Development and the Benefits of Child Care for their Children

• Increase Awareness of the *Day Care Act and Regulation*

Action • Launched Directory of Licensed Child Care Facilities

• Launched Identity Sticker Symbols for Licensed Child Care Centres and Approved Family Day Care Homes

• Launched ELCC Website Mailbox

The Plan funded the development of the Directory of Licensed Child Care Facilities; in addition to a website mailbox to receive feedback, comments and suggestions regarding licensed child care. Consultation on proposed amendments to the Day Care Regulations occurred in Spring 2008; a summary of responses was released in December 2008.

Additional Program Funding Funding for Repair/Renovation and Program Grants

The Plan funded the **Repair and Renovation** project which provided financial assistance to both commercial and non-profit licensed child care centres to improve or enhance the physical environment and grounds of the centres by doing repairs, renovations, and improvements. The program received a total of approximately $1.9 million approved funding. As part of this funding:

- 84 centres were approved for Repair and Renovation funding

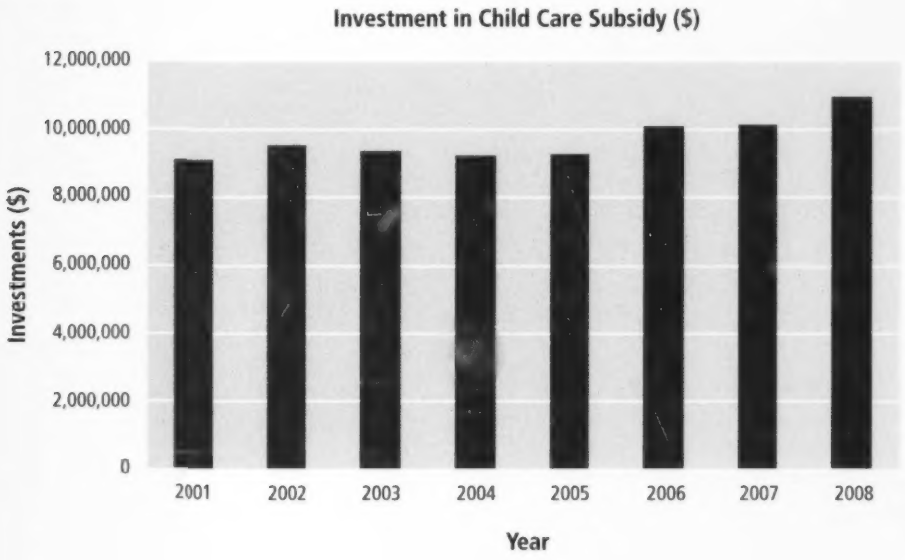
The Plan funded the **Outdoor Play Space** program which provided one-time funding (2007/08) to licensed child care centres and licensed family home day care agencies for the creation and maintenance of natural, stimulating outdoor play spaces to encourage the healthy development and physical fitness of children. Total approved funding for this program was approximately $5.1 million. During 2007/08:

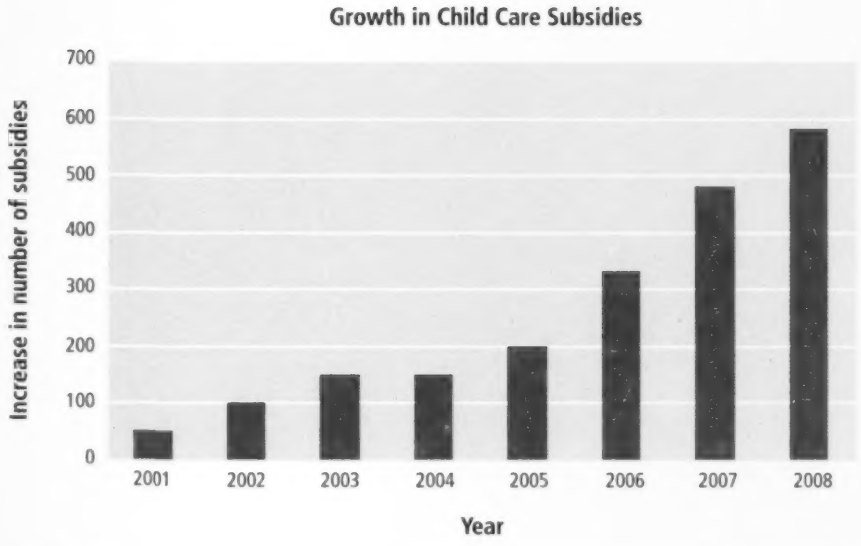
- 272 centres received Outdoor Play Space funding

During 2007/08, The Plan funded the **Program Enhancement Grant** which provided one-time funding for licensed child care centres and licensed family home day care agencies to increase their capacity to offer a high quality early learning environment for the development and/or enhancement of their child care program. Total approved funding for this program was approximately $2.6 million. During 2007/08:

- 358 licensed child care centres received Program Enhancement funding

The following charts depict the increase in the investment and number of child care subsidies from April 1st 2001 – March 31st, 2008.





* As of March 31st 2001, there were 2,655 subsidies; the total number of subsidies as of March 31, 2008 was 3,123. Each year indicates cumulative growth of increase in subsidies.

Link to NS Framework for Social Prosperity

Licensed child care centres and approved family home day care agencies are eligible to provide child care to parents receiving child care subsidy. Increasing the number of portable child care subsidies means that parents have greater flexibility to choose child care that is inclusive, developmentally appropriate, and reflects the diverse needs of children and their families. Ongoing investment in subsidized child care spaces helps to ensure that our citizens have, "...equitable access to opportunities to meet their full potential and contribute to our social prosperity".

—Government of Nova Scotia, Weaving the Threads: A Lasting Social Fabric (2007), p.16.

Conclusion—Enhancements to Nova Scotia's Early Childhood Development and Early Learning and Child Care System

Over the past seven years, the Province of Nova Scotia has worked to ensure investments in early learning and child care reflect the diverse needs of children and their families. The table below illustrates the federal portion of grant funding (2001–2008) to enhance child care services in five areas (stabilization and wage enhancement, expansion of licensed child care spaces, program grants and child care operating grants) in Nova Scotia.

Federal Investment in Child Care in Nova Scotia: 2001 – 2008

Investment Area	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	TOTAL
Stabilization Grant	$3.4 M	$3.6 M	$3.8 M	$3.9 M	$4 M	$4.3 M	$5 M	**$28 M**
Supported Child Care*	$278,556	$1.2 M	$791,000	$976,671	$1.2 M	$1.3 M	$1.4 M	**$7.2 M**
Expansion**		$1.7 M			$93,018	$2.3 M	$1.3 M	**$5.2 M**
Program Grants***		$399,861	$702,517				$7.7 M	**$8.8 M**
Child Care Operating Grant						$900,000	$5.4 M	**$6.3 M**
Investment of Federal Expenditures								**$55.5 M**

Overall, since baseline funding began in 2001 for early childhood development programs, investment in the quality, flexibility and inclusiveness of child care programming in Nova Scotia has continued to increase. Nova Scotia has continued to make the early childhood development system and the early childhood sector a priority, as evidenced not only by our investment, but through our commitment to implementing the Early Learning and Child Care Plan. The Plan is linked to the Nova Scotia Social Prosperity Framework, weaving together the factors affecting social prosperity such as the health, safety and inclusion of children and their families with factors affecting economic prosperity such as investments in workforce development and facility upgrades.

In keeping with the vision of the New Nova Scotia and the Nova Scotia Social Prosperity Framework, investments in early childhood development have been multi-faceted; continued integration, expansion and enhancements to the system will further build upon the foundation that has been created in the province while weaving together the needs of our youngest citizens and their families.

* Supported Child Care was formerly reported as Inclusion/Differential

** Expansion includes: New/Expanded Child Care Centres (2002-03, 2005-06, 2006-07, and 2007-08); Repair/Renovation Loan (2006-07, 2007-08)

*** Program Grants include: CDC Resources Grant (2002-03); Material and Resources Grant (2003 -04); Outdoor Play Space Grant and Program Enhancement Grant (2007-08)

Child Well-Being · 2007 Report

Families and children are the foundation of both social and economic prosperity. The Federal, Provincial and Territorial governments of Canada have joined together in the 2000 Early Childhood Development Initiative as a means of promoting a good start in life for all children. The children of today represent the future. We all want our children to grow up to be happy, healthy, contributing adults. The early years, between birth and the age of five, last a lifetime as this period of development sets either a sturdy or a fragile stage for continued development.[7] If we provide them with a solid foundation in life, we can look to the future with confidence and hope. Ensuring our children have the opportunity to develop to their full potential within safe and secure environments involves the combined efforts of parents, communities and governments.

In September 2000, First Ministers released a communiqué on early childhood development. As part of the public reporting commitments outlined in the communiqué, First Ministers agreed that governments would "make regular public reports on outcome indicators of child well-being using an agreed upon set of common indicators … related to the objectives established for early childhood development". This chapter fulfills Nova Scotia's commitment to report to our citizens on the health and well-being of our children.

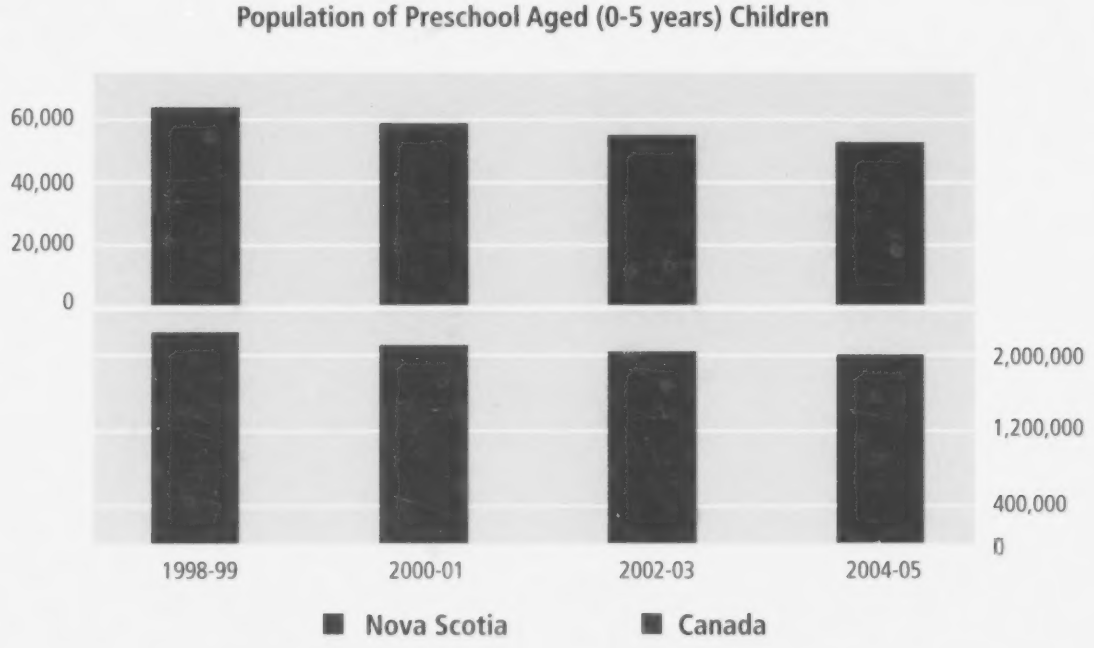
Children are shaped by the world around them, and many environments affect their development. It is generally accepted that 'healthy children emerge most often from healthy families, and healthy families are in turn promoted by healthy communities'[8]. The indicators inform us of five aspects of child well- being: physical health and motor development, early development, safety and security, family context and community context. It is important to emphasize that it is not possible to assess the overall development of children on the basis of these select few indicators. The indicators presented here do not provide a comprehensive overview of child well-being.

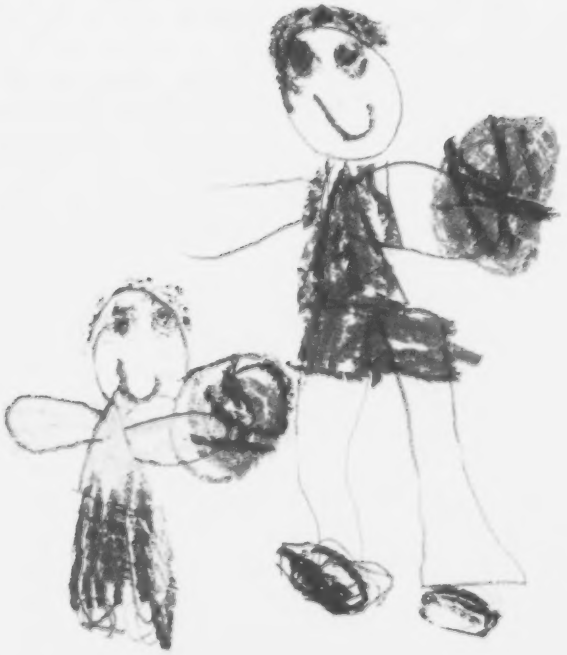
While we are not able to measure all aspects of child well-being and the factors that influence well-being, considerable progress has been made over the past decade in expanding data collection in this area. Of particular relevance to this report is the National Longitudinal Survey of Children and Youth [NLSCY]. Initiated in 1992 to gather data on the well-being of children and their families, the NSLCY provides information on the characteristics and life experiences of children and youth as they grow from infancy to adulthood across the ten provinces. The NSLCY does not collect data about children living in institutions or on Aboriginal Reserves. Every two years, the NLSCY collects comprehensive data on children's individual, family, preschool, school and community characteristics and experiences and children's physical, social, emotional, cognitive, language, academic and behavioural outcomes. Parents, teachers, principals and children aged 10 and older are surveyed. The families of approximately 23,000 Canadian children who were under 12 years old in 1994/95 participate in the NLSCY every two years. In keeping with a need for a greater understanding of learning and development in the early years, children ages birth to five years are added to the sample as the original cohort ages. In addition to the NSLCY, there are other national sources of information about young children. The provincial Vital Statistics Registry, the Survey of Labour and Income Dynamics and the Census are additional sources of information about young children and their families.

[7] Talking About Our Children – Our Future (2005) Children and Youth Action Committee/Nova Scotia Department of Education.

[8] Ross, David P., Scott, Katherine and Kelly, Mark A. (1996) "Overview: Children in Canada in the 1990s" in Growing UP in Canada – National Longitudinal Survey of Children and Youth HRDC/Statistics Canada.

This chapter provides information on the well-being of children from birth to age five in Nova Scotia for the years 1998-1999, 2000-2001, 2002-2003 and 2004-2005. National data is also provided for comparison purposes. There were an estimated 63,700 children under the age of six in Nova Scotia in 1999. This estimate had dropped to 52,500 in 2004-05, a decrease of 16.5%. Canada experienced a decrease of 10.6% in the numbers of pre-school aged children (2.2 million in 1998-1999 and 2.0 million in 2004-2005) in the same period. The chart below depicts the numbers of preschool aged children in Nova Scotia and Canada between 1999 and 2005.





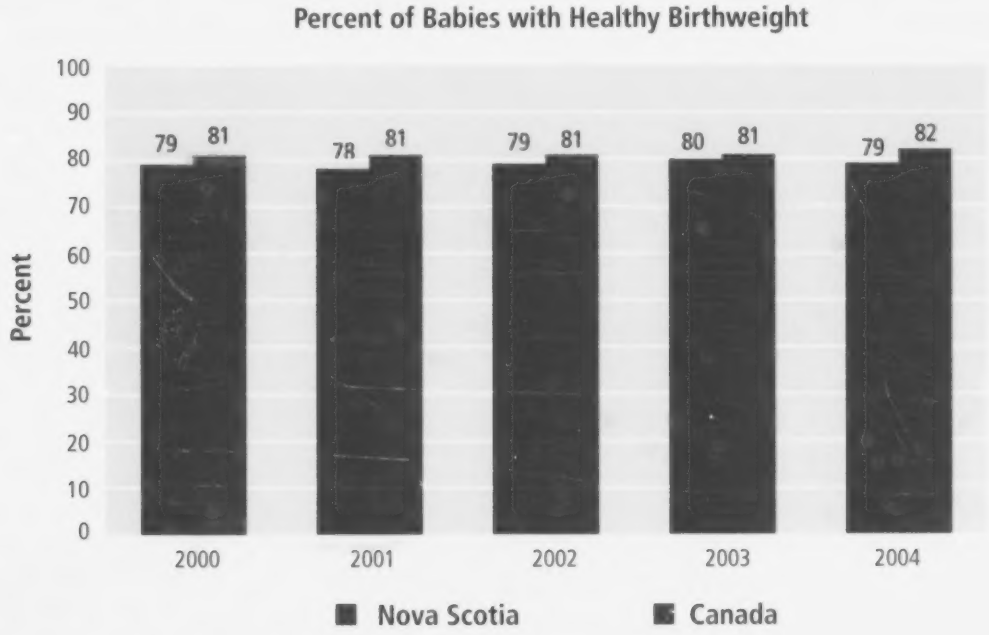
Physical Health

Healthy Birth Weight[9]

A healthy birth weight for babies is between 2,500 grams and 4,000 grams. Babies born outside this range are at increased risk for a variety of health problems and disabilities. In 2000, 79 per cent of babies born in Nova Scotia were a healthy birth weight. In Canada, 81 per cent of babies born in the same year were a healthy weight at birth. Although there have been small fluctuations, the proportions of low, healthy and high birth weight babies have remained relatively constant.

Low birth weight (less than 2,500 grams) babies may be born pre-term, small for gestational age or both. Babies with low birth weight are at increased risk for a variety of health problems throughout their lifetime. Many factors contribute to low birth weight, including nutrition of the mother during pregnancy, social support, lifestyle, the mother's age and health.

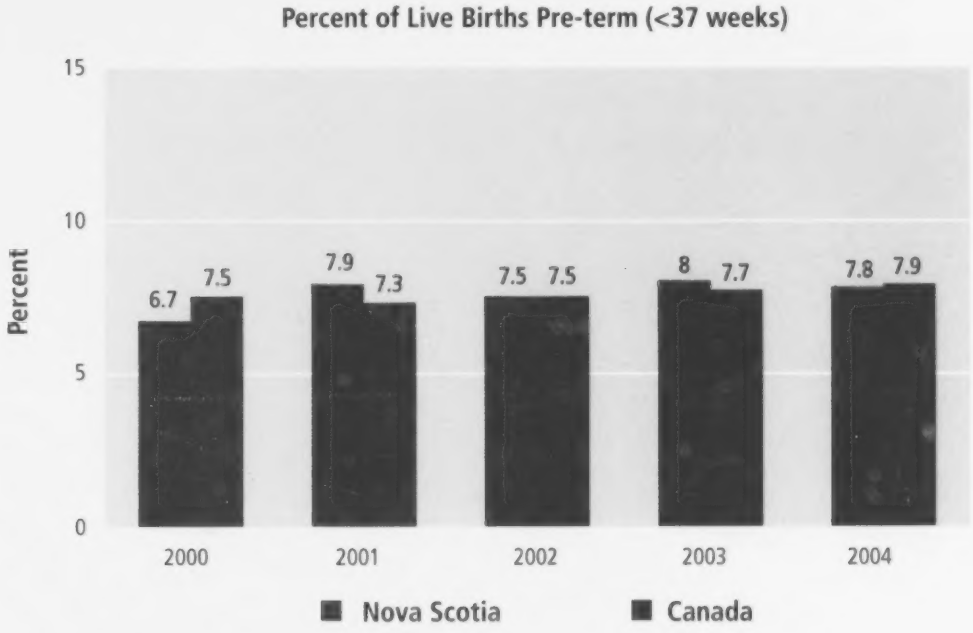
High birth weight (more than 4,000 grams) babies are more likely to experience difficult births and health problems. High birth weight babies may also be associated with maternal health problems. In Nova Scotia, the incidence of high birth weight babies has declined marginally since 2000. In 2000, 16 per cent of babies were born with high birth weight. The proportion of high birth weight babies declined to 14.7 per cent in 2004.



[9] Canadian Vital Statistics - Birth Database (Statistics Canada); Exclusions: births with unknown birth weight, births to non-Canadian residents, birth where residence of mother is unknown

Pre-term Birth Rate[10]

Babies who are born at less than 37 weeks of gestational age (less than 259 days) encounter health problems often related to low birth weight and respiratory problems. There are many contributing factors associated with pre-term birth. Lifestyle and medical conditions may place some pregnant women at increased risk of delivering their baby before 37 weeks of gestation. The incidence of pre-term birth[11] in Nova Scotia has fluctuated slightly between 2000 and 2002. In 2000, the incidence of pre-term births was 6.7 per cent, in 2001, the incidence was 7.9 per cent and in 2002, it dropped slightly to 7.5 per cent. These numbers compare favourably with Canadian data for the same periods.



Immunization[12]

Immunization against infectious disease is an important public health strategy towards preventing several serious diseases that affect young children. Meningococcal group C disease, measles and haemophilus influenzae-b (Hib) are three serious diseases that can be prevented by immunization. There were no reported cases of meningococcal group C disease, or measles, in Nova Scotia between 1998 and 2006. There was a single case of Hib reported in 2002.

Infant Mortality[13]

One of the major contributing factors to increases in life expectancy during the twentieth century has been a substantial reduction in infant mortality. Canada has experienced a dramatic decline in infant mortality rates. In 2000, the infant mortality rate in Canada was 5.3 per 1000 compared to a rate of 27.3[14] per 1000 in 1960. Infant mortality refers to the death of a live born infant within the first year of life. In Nova Scotia, the number of infant deaths has ranged between 4 and 6 per 1000 live births in recent years.

[10] Canadian Vital Statistics – Birth Database (Statistics Canada)

[11] Excludes births with unknown gestational age and gestational age less than 20 weeks, and births to non-Canadian residents

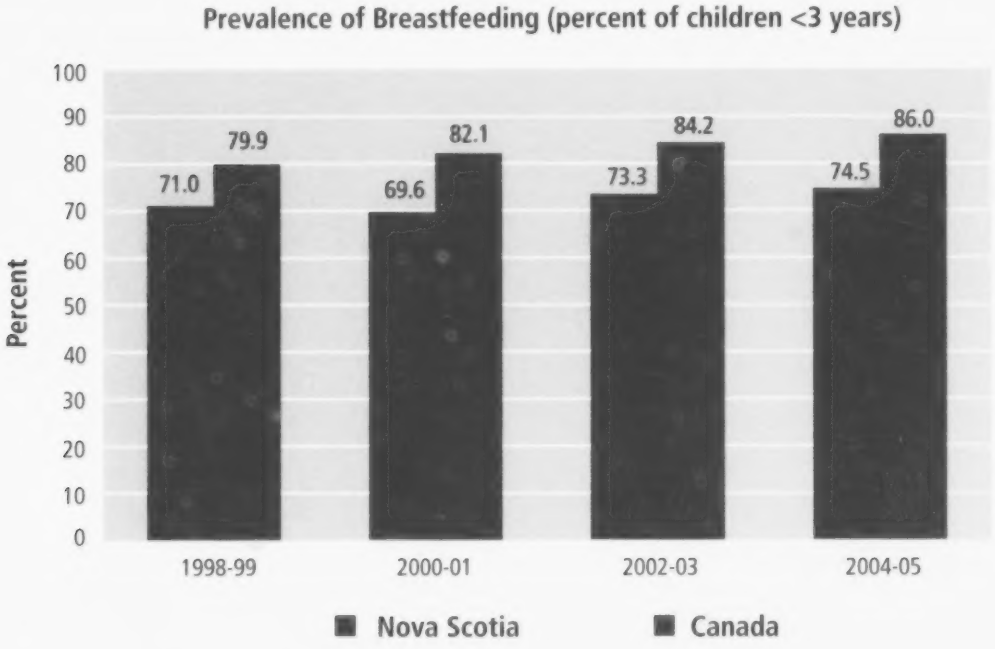
[12] Source: Immunization and Respiratory Infections Division, Centre for Infectious Disease Prevention and Control, Public Health Agency of Canada; Definition: the rate of new cases reported by year for children 5 years and younger

[13] Canadian Vital Statistics - Mortality, Summary List of Causes (Statistics Canada); Definition: the number of infants who die in the first year of life per 1000 live births

[14] *Selected Infant Mortality Statistics, Canada 1921-1990.* (Statistics Canada) Catalogue 82-549

Breastfeeding[15]

Breastfeeding is an ideal source of nutrition for babies. Breast milk contains immunoglobulins and antibodies that fight infection. As a result, breastfed babies have fewer childhood illnesses including respiratory, ear and gastrointestinal infections, asthma, eczema and food allergies. Prevalence of breastfeeding includes the proportion of children aged 0-3 who are currently (or have ever been) breastfed. Prevalence of breastfeeding among infants in Nova Scotia is less than the Canadian rate.

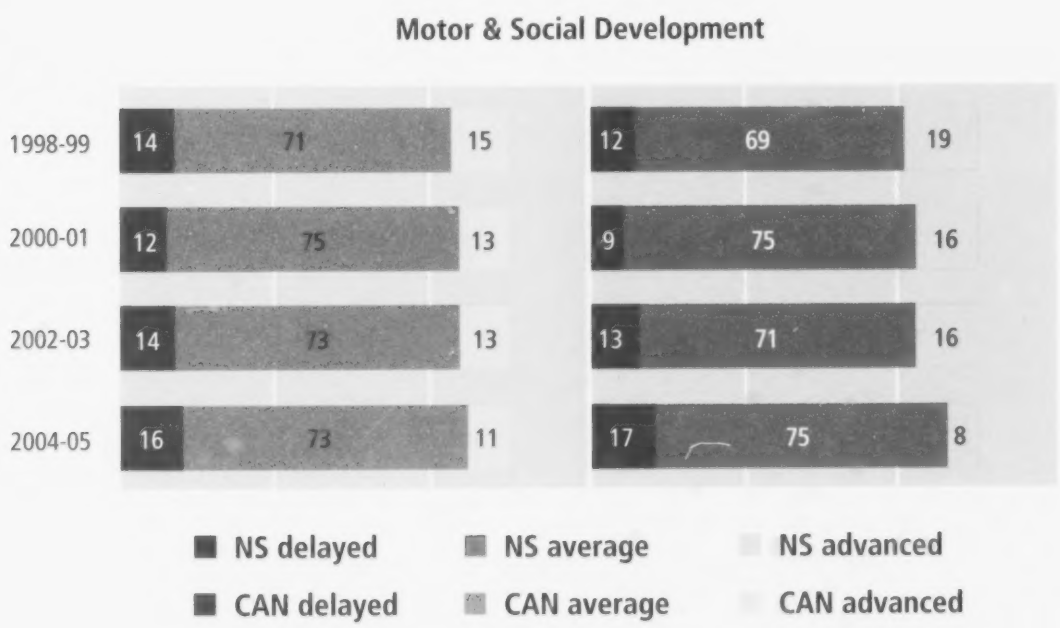


[15] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire

Early Development

Physical Health and Motor Development [16]

Physical development for a child includes their overall physical health and the development of fine motor skills, including the ability to hold a pencil and turn the pages of a book; and gross motor skills such as running or climbing. Social development involves how the child interacts with other children and how they express their feelings. The Motor and Social Development [MSD] scale consists of a set of 15 questions that measure dimensions of the motor, social and cognitive development of young children from birth through three years. The questions vary by age of the child and are asked of the person most knowledgeable of the child, usually the mother. The mean score for the population is set at 100 with a standard deviation of 15. The standardized score accounts for the child's age and allows for comparisons of scores to be made across age groups. Children scoring between 85 and 115 on the scale are classified as having average development. Children scoring from 0-84 (more than one standard deviation below the mean) are classified as having delayed motor and social development. Children scoring above 115 (more than one standard deviation above the mean) are classified as having advanced motor and social development. In Nova Scotia, more than 80 per cent of children scored average or advanced on the MSD scale between 1998-99 and 2004-05. These indicators compare favourably with the Canadian data.



[16] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children aged 4-5 years, children living in the Territories, children living on reserve, children living in institutions

Emotional Health

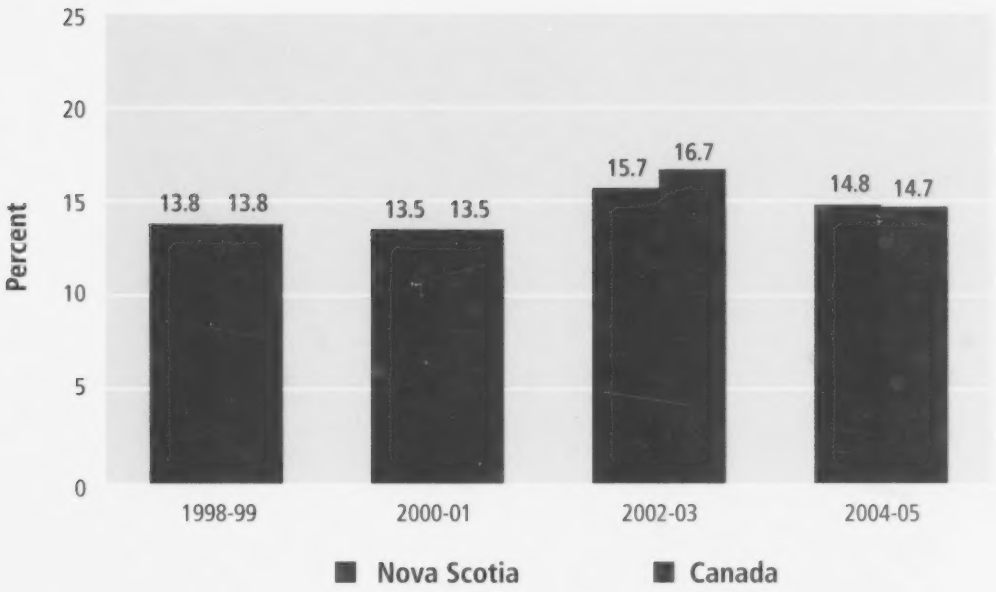
A child's emotional health involves the way that he or she thinks, feels, behaves, experiences things and relates to the world. A child's emotional health can be positively influenced in a warm accepting home where guidance is consistent and positive parenting is provided. The NSLCY measures emotional well- being using the Emotional-Problem Anxiety Score[17], and the Hyperactivity-Inattention Score[18]. These scores are intended to assess the extent of the presence or absence of certain aspects of a child's behaviour. The questions are asked of the person most knowledgeable of the child and do not represent professionally diagnosed problem behaviours.

The Emotional Problem-Anxiety Score is one of several behaviour scales examined in the NSLCY. It relates to how often a child seems to be unhappy, sad or depressed; less happy than other children; too fearful, nervous or worried; too nervous or tense; and has trouble enjoying his/her self. The proportion of children showing higher levels of anxiety increased slightly between 2000/01 and 2002/03. In all three periods, the Nova Scotia data compares favourably with the Canadian data.

The Hyperactivity-Inattention Score relates to how often the child fidgets, has trouble sticking to any activity, cannot concentrate, has difficulty waiting for his/her turn in games, is impulsive, acts without thinking, cannot settle on anything for more than a few moments or is inattentive. There are two scales – one for children aged two-three years and one for children aged four-five. The scales are composed of different items intended to capture aspects of hyperactive/inattentive behaviour.

A high score indicates behaviours associated with hyperactivity and inattention. The proportion of children exhibiting behaviours consistent with hyperactivity and inattention in Nova Scotia compare favourably with Canadian data.

Percent of Young Children with High Emotional Problems



[17] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children aged 0-1 years, children living in the Territories, children living on reserve, children living in institutions

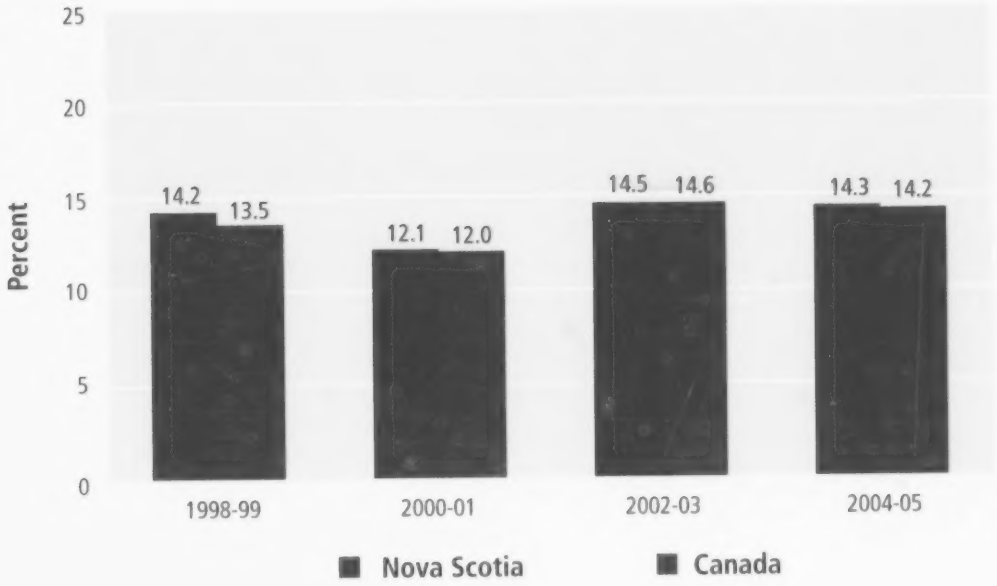
[18] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children aged 0-1 years, children living in the Territories, children living on reserve, children living in institutions

Social Knowledge and Competence

Social knowledge and competence for a child relates to the child's interactions with other people and their environment. The NSLCY measures social knowledge and competence using the Physical Aggression Score[19], and the Personal-Social Score[20]. These scores are intended to assess the extent of the presence or absence of certain aspects of a child's behaviour. The questions are asked of the person most knowledgeable of the child and do not represent professionally diagnosed problem behaviours.

The Physical Aggression Score relates to how often the child is defiant, gets into fights, has temper tantrums or a hot temper, has difficulty waiting for her/his turn in games or groups; reacts with anger and fighting when accidentally hurt by another child, has angry moods, or kicks, bites or hits other children. There are two scales – one for children aged two-three years and one for children aged four-five. The scales are composed of different items intended to capture different aspects of physically aggressive behaviour. There have been slight fluctuations between periods. The proportion of children in Nova Scotia demonstrating higher levels of physical aggression and conduct problems are approximately equivalent and compare favourably with the Canadian data.

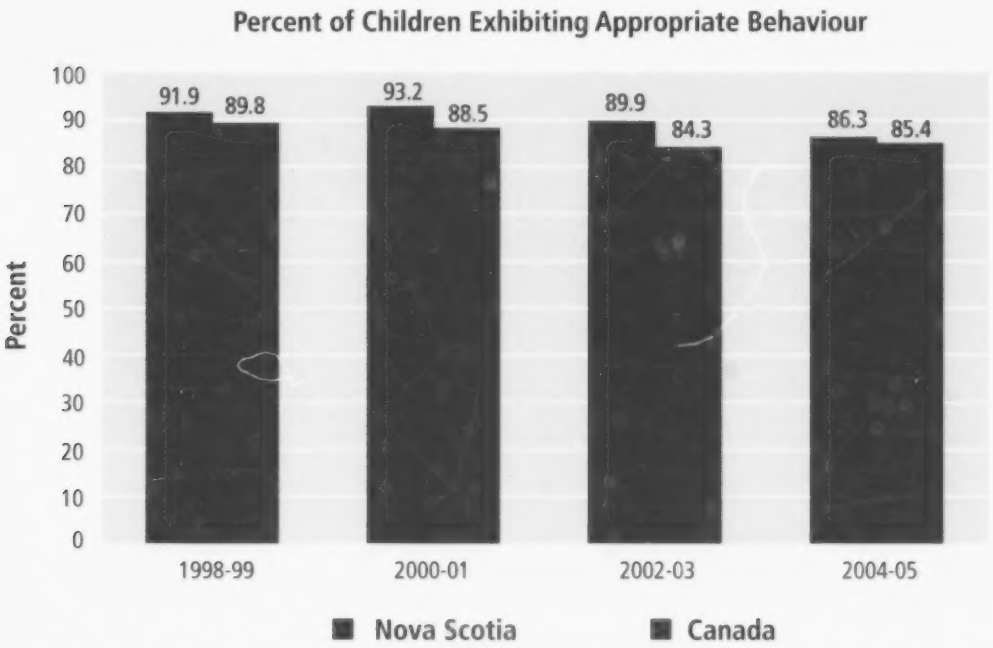
Percent of Children Expressing High Aggression



[19] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children aged 0-1 years, children living in the Territories, children living on reserve, children living in institutions

[20] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children aged 4-5 years, children living in the Territories, children living on reserve, children living in institutions

The Personal-Social Score (formerly the Pro-Social Behaviour Score) relates to how a young child interacts with him/herself, with strangers, with their parent and with objects such as toys. Personal-social behaviour is influenced by a child's personality and temperament. The Personal-Social Score measures the proportion of children who do not exhibit age appropriate personal-social behaviours. The scale ranges from 0-60 with a low score indicating lower levels of age appropriate behaviour. In Nova Scotia, the proportion of children who do exhibit age appropriate personal-social behaviours compares favourably with the Canadian data.



Language Skills[21]

Language skills are important. Children need to be able to communicate verbally in a way that is understood by others and to understand what others say. The NSLCY uses the standard score for the Peabody Picture and Vocabulary Test – Revised [PPVT-R] to measure the proportion of children aged four and five who have delayed, average and advanced levels of receptive or hearing vocabulary. The standardized score takes into account the child's age by two-month age groups and allows for comparisons of scores to be made across age groups. Children scoring between 85 and 115 on the scale are classified as having average language skills for their age. Children scoring from 0-84 (more than one standard deviation below the mean) are classified as having delayed language skills. Children scoring above 115 (more than one standard deviation above the mean) are classified as having advanced language skills. There is a consistently smaller proportion of Nova Scotia children exhibiting delayed scores on the PPVT-R than the Canadian data when the data is available (it was not available for Nova Scotia in 2004-05).

[21] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children aged 0-3 years, children aged 4-5 for whom the person most knowledgeable did not provide consent for the PPVT-R to be administered, children living in the Territories, children living on reserve, children living in institutions

Safety and Security

Injury Hospitalization Rate[22]

Serious childhood injuries result in hospitalization. The injury hospitalization rate is the proportion of children per 100,000 who are hospitalized for treatment of injuries. Translating the numbers into a rate per 100,000 allows a comparison with the incidence of hospitalization due to injury across the country and allows a standardized measure for tracking the incidence over time. Hospitalization rates may be affected by both admittance procedures and frequency of injuries.

Injuries can involve accidents - unintentional injuries, or they can be the result of intentional harm. In Nova Scotia, most childhood injuries resulting in hospitalization are due to unintentional injuries. In 2002-03, for example, 197 children under five were hospitalized due to all external causes of injury and 183 of these were due to accidental causes. The rate has fluctuated between 1998 and 2005. In 2002-03, the rate of hospitalization in Nova Scotia exceeded the Canadian rate for the first time since 1998. Nova Scotia data were not available for 2004-05.

Injury Mortality Rate[23]

Over the last three decades, the major 'external' causes of child mortality have been the result of injury. The injury mortality rate is the proportion of children aged birth to four years who die as a result of an injury. Beginning in 1971, Statistics Canada has recorded a significant decline in the rate of childhood injuries resulting in death. There have been many regulatory and legislative changes, improvements to product safety and increased awareness of safe practices over the last three decades. When interpreting these statistics, it is useful to keep in mind the smaller provincial population in Nova Scotia. There were five deaths among young children in 1998, and four in 1999 and 2000 respectively. In each reported year, the injury mortality rate in Nova Scotia was lower than in the country as a whole. Nova Scotia data is not available beyond 2000.

Family Related Indicators

Parents are the primary support for their children and have a critical role in shaping how a child develops, both mentally and physically. Each child is born with a set of characteristics inherited from their parents that influence their well-being. Genetic inheritance can provide protective as well as risk factors, whose impacts may be mediated by environmental influences. Family related indicators refer to measures of various aspects of parental health and behaviour that are known to impact on the health and well-being of their children.

Parental Education[24]

The education level of parents is an important aspect of socio-economic status. The value that a parent places on their child's education and level of academic achievement is also linked to the level of education the parent has attained. Educated parents tend to have educated children. Research has found consistent positive effects of parent education on all aspects of parenting including parenting styles, beliefs, and childrearing philosophy. Educational achievement among parents of young children has increased between 1998/99 and 2004/05 in Nova Scotia and Canada.

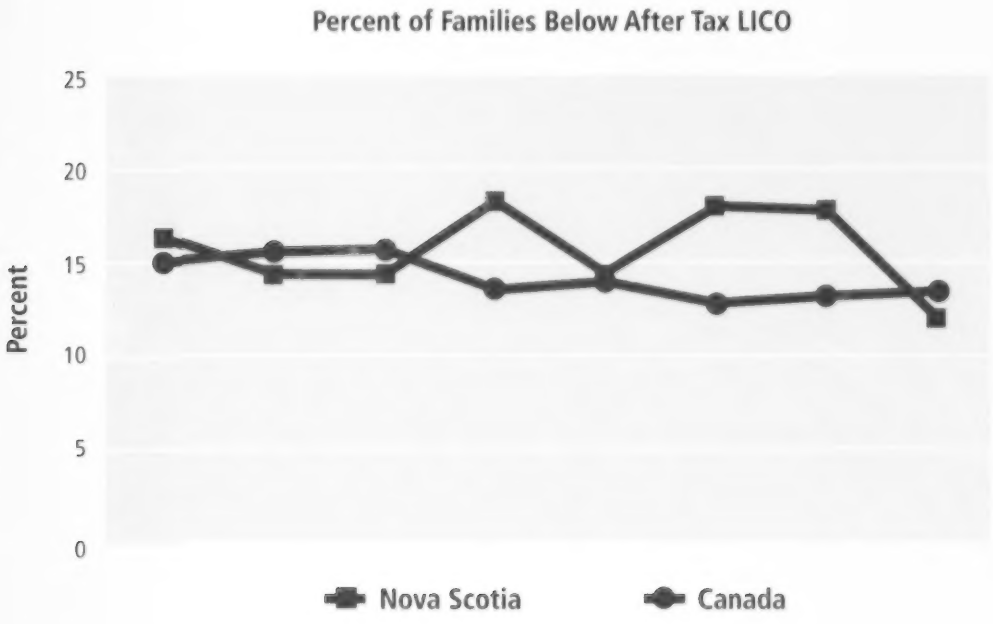
[22] Canadian Institute for Health Information (CIHI) Hospital Morbidity Database; Exclusions: newborns, out-patients and emergency department visits

[23] Canadian Vital Statistics - Mortality, Summary List of Causes, 1998,1999 & 2000 (Statistics Canada); Exclusions: non-Canadian residents

[24] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children whose person most knowledgeable about the child (or spouse) is not a biological, step, adoptive or foster mother, children living in the Territories, children living on reserve, children living in institutions

Parental Level of Income[25]

Income can affect a child's development in several ways including their physical, mental, social and academic development. Parental income level is measured by the After Tax Low Income Cut-Offs (LICO). The After Tax LICO is set according to the proportion of annual post tax income (total income after the deduction of income taxes) spent on basic needs. Low Income Cut-offs identify low-income families as families that spend a significantly higher proportion of their income on food, shelter and clothing than an average Canadian family of comparable size and community of residence. A household that spends 20 per cent more on basic needs than the average family is considered to be living below the low-income cut-off. The LICO defines a set of income cutoffs below which people may be said to live in straitened circumstances. The LICO is adjusted for community size and family size. The proportion of Nova Scotian families with young children living in straitened circumstances has fluctuated between 1998 and 2005 and appear to be declining. As the LICO is a relative measure, considerable variation can occur from year to year as the economy changes.



Parental Depression[26]

Depression among parents affects the entire family. Depressed parents are usually withdrawn, tired, despondent and pessimistic about the future. These are not healthy influences for children. Children raised by a depressed parent are more likely to have behaviour problems and poor cognitive development. Children in low income households are more likely to be living with a parent suffering from depression. The stresses associated with raising children in straitened economic circumstances may contribute to depression among parents. The NSLCY uses a condensed version of the Statistics Canada Depression Rating Scale [CES-D]. The scale measures the occurrence and severity of symptoms associated with depression among the surveyed parents/guardians of young children. It does not represent the occurrence of clinically diagnosed depression. The proportions of parents in Nova Scotia reporting symptoms of depression are approximately equivalent and compare favourably with the Canadian data.

[25] Survey of Labour and Income Dynamics: Reference years 1998-2001; data based on provinces only.

[26] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions

Tobacco Use During Pregnancy[27]

Tobacco use is the leading cause of preventable disease and illness in Canada. Second hand smoke is a serious health risk for anyone exposed to it. Fetuses and young children are especially vulnerable to the harmful effects of tobacco smoke in their environment. These effects include stillbirth, low birth weight, increased risk of sudden infant death syndrome, reduced lung development and increased incidence and severity of respiratory illness, such as asthma. Smoking in pregnancy has also been associated with other lifestyle factors including stress, nutrition, and weight gain that collectively impact negatively on pregnancy outcomes. Reducing the number of women who smoke during pregnancy is an important public health objective. Smoking rates are highest among young women, poor people and those in remote communities. Persons who smoke also have higher rates of alcohol and drug use. Incidence of smoking is measured by the proportion of children one or younger whose mother smoked during her pregnancy with the child. The proportion of mothers smoking during pregnancy in Nova Scotia has declined since 1998–99 (29%) through 2004-05 (19.7%).

Family Functioning[28]

The family is the primary support for the healthy development of children. When the family has good communication, respect, trust, support and shared responsibility, the child is more likely to develop positive social relationships, appropriate behaviours and to become a responsible adult. The NSLCY asked parents a series of questions related to family functioning, including questions about problem-solving practices, expressive communication, decision-making and levels of acceptance. It is important to note the scale does not reflect a clinical diagnosis. Families with high scores exhibit a high degree of dysfunctional behaviour. A dysfunctional family environment increases the likelihood of childhood behaviour and emotional problems such as aggression and anxiety. The proportions of families in Nova Scotia reporting low levels of family functioning are small, and they are approximately equivalent to the Canadian data.

Positive Parenting[29]

The NSLCY also asked parents a series of questions related to positive parenting practice. The purpose of the scale incorporated in the NSLCY is to measure certain positive parental interactions such as praising the child, playing with the child, and laughing together. Children whose parents do not engage frequently in these types of positive behaviours have a higher risk for poor motor and social development and the development of negative social behaviours as they grow up. Positive parenting teaches the child socially and culturally acceptable behaviours and helps develop love, trust and respect between the parent and child. Positive parenting has been associated with positive personal and social behaviour on the part of the child and the development of a strong and lasting relationship between the parent and child. The proportions of parents who exhibit low positive parenting in Nova Scotia are relatively small, and compare favourably with the Canadian data. Most parents in Nova Scotia (92% in 1998/99, 94% in 2000/01, 95% in 2002/03 and 95% in 2004/05) practice positive parenting behaviours with their children. These numbers compare favourably with Canadian data

Reading by an Adult[30]

Adults who read to young children have a positive impact on the child's educational outcomes. In general, the more frequently a child is read to, the more positive the benefits to vocabulary and reading comprehension during the primary school years. Reading to children helps stimulate essential and continued brain development. It helps to expand their imagination and their understanding of the world. Reading also provides an opportunity to spend time with children. The NSLCY asked how often the child is read to by a parent or another adult. There was a very significant increase in the incidence and prevalence of daily reading to a child by an adult between 1998/99 (64%) and 2000/01 (80%), which was subsequently maintained in 2002/03 (76%) in Nova Scotia. Nova Scotia data were not available for 2004/05.

27 National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions, children aged 2-5

28 National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions

29 National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions

30 National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions

Community Related Indicators

Families, in turn, are affected by the physical, social, economic, and community environments in which they live. Neighbourhoods are dynamic social environments, which exert many influences on residents, including children. Physical surroundings can greatly affect children's health and well-being, and research is beginning to provide evidence that growing up in a community that is perceived to have higher levels of cohesion, stability and social supports will lead to healthier child development. The NSLCY is the source of the indicators presented here. The NSLCY asked a series of questions meant to assess the extent of the presence or absence of certain neighbourhood characteristics. The Neighbourhood Cohesion Score and the Neighbourhood Safety Score are meant to illustrate the cohesion and safety of neighbourhoods children are living in as perceived by the person most knowledgeable about the child.

Neighbourhood Cohesion[31]

The Neighbourhood Cohesion Score is based on perceptions of trust of neighbours, the presence of adults who children can look up to, cooperation of neighbours in dealing with problems, watching out for children's safety and keeping an eye on other people's property when they are away. The Neighbourhood Cohesion Score ranges in value from 0-15 and higher scores indicate a higher level of cohesion in the child's neighbourhood. To identify low levels of neighbourhood cohesion, thresholds were established by taking the score closest to the 10th percentile based on the 1998/99 NSLCY for children in all provinces. The variable represents the proportion of children whose neighbourhoods exhibit lower levels of cohesion and those who do not. In Nova Scotia, there are slightly fewer parents who report lower levels of neighbourhood cohesion in 2000/01 (11%), 2002/03 (11%), 2004/05 (12%) than in 1998/99 (16%). The Nova Scotia results compare favourably with the Canadian results.

Neighbourhood Safety[32]

The Neighbourhood Safety Score is meant to assess various components about the neighbourhood, such as whether it is safe to walk in the community after dark, whether it is safe for children to play outside, and the availability of safe play areas. These characteristics have been identified as having an influence on the overall physical and social development of children. Some neighbourhoods are actively involved in making their community a safer place by establishing programs such as Neighbourhood Watch. The Neighbourhood Safety Score ranges from 0-9 with higher scores indicating a greater sense of safety in the child's neighbourhood. To identify low levels of neighbourhood safety, thresholds were established by taking the scale score that is closest to the 10th percentile based on the 2000/01 data (these questions were not asked in the 1998/99 NSLCY) for children in all provinces. Approximately 30 per cent of parents in Nova Scotia rated their neighbourhoods low on the Neighbourhood Safety Score in 2000/01. This is slightly higher than the comparable Canadian data (24%) in the same year. In 2004/05, the same proportion of Nova Scotian parents (30%) rated their neighbourhoods low on the Neighbourhood Safety Score, while 22% of Canadian parents rated their neighbourhoods low on the same scale.

[31] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions

[32] National Longitudinal Survey of Children and Youth, Master File (Statistics Canada), Cycle 3 (1998/99), Cycle 4-v2 (2000/01), Cycle 5 (2002/03), Cycle 6 (2004/05) Child Questionnaire; Exclusions: children living in the Territories, children living on reserve, children living in institutions

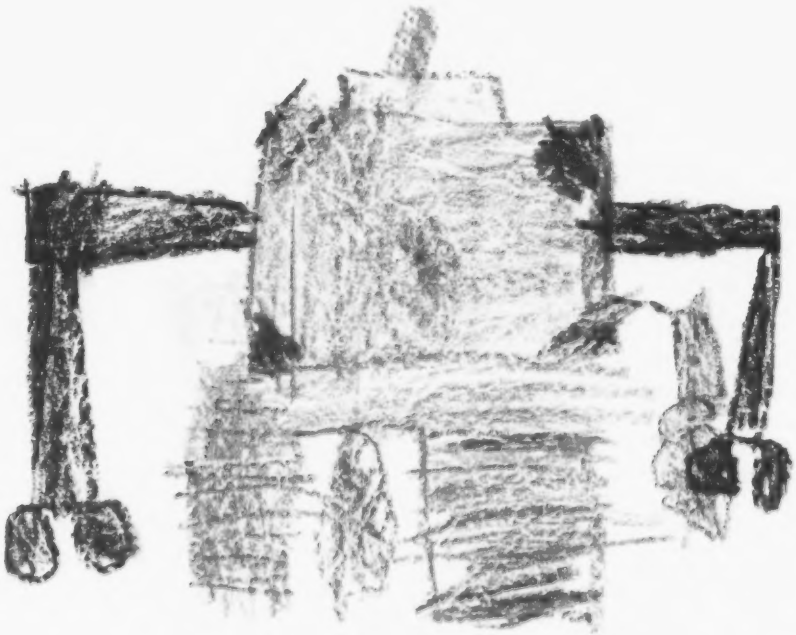
Committed to Our Children

In summary, the information presented in this chapter indicates we have many strengths upon which to build. We are also confronted by challenges. All members and sectors of society have a responsibility to meet these challenges. Our goal is to work toward continually helping children get the best start in life by providing important supports to families and children. The improvements to early childhood development initiatives and early learning and child care services are a relatively small proportion of the myriad of influences and factors impacting on the lives of our children and their families. The governments of Canada, Nova Scotia, and municipalities contribute to the well-being of our children through many programs and services. As well, there are a range of organizations throughout the province that also contribute daily to the well-being of our children.

Research, knowledge and information are the foundations of evidence-based decision-making and are critical to informed policy development. This chapter reports information about some indicators of child well-being. It is not comprehensive, but it does increase our knowledge. Nova Scotia is committed to continuing to improve our reporting on the well-being of children and will continue to work with our federal, provincial and territorial colleagues to improve our data collection and reporting in order to inform future public policy decisions about programs and services impacting children and their families.

Technical Note

The data included in this chapter come from several sources, including the *National Longitudinal Survey of Children and Youth* [NLSCY], the *Survey of Labour and Income Dynamics* [SLID] and *Canada Vital Statistics*. Some information previously reported is re-reported due to recalculation of population using the 2001 Census. Updating the sample weights for surveys, such as the NLSCY and SLID, is essential to ensure consistency between Statistics Canada's official population figures and the survey estimates which are based on estimates between census years.



Addendum: Federal Funding Principles and Program Indicators*

Principles and Program Indicators	Early Childhood Development Communiqué (ECDI)	Multilateral Framework on Early Learning and Child Care (ELCC)
Availability	Governments will report on the availability of early childhood development programs and services funded under the Federal-Provincial-Territorial Early Childhood Development Initiative using one or more of the following indicators: • Number of clients served (i.e. number of children served, number of families served, and/ or number of program 'spaces' or equivalent. • Number of program sites.	Flexible and responsive early learning and child care options should be broadly available to promote early childhood development and to support parents to participate in employment training. Examples of initiatives that support availability and accessibility could include: • Increasing early learning and child care spaces. • Supporting extended and flexible hours of operation. • Parent information and referral.
Accessibility	Where the objective of an investment by governments is to improve accessibility, governments will report on one or more of the following indicators of accessibility: • Increase in the % of target population served • Change in the socio-demographic profile of the client population	
Affordability	Where the objective of an investment by governments is to improve affordability, governments will report on changes in the fee and/or subsidy structures of the relevant program.	Early learning and child care services should be affordable. Governments have established mechanisms to assist parents in meeting the costs of early learning and child care. Examples of initiatives that support affordability could include: • Enhancing fee subsidies that take into account parents' ability to pay. • Operational funding.
Quality	Where the objective of an investment by governments is to improve quality, governments will report on one or more indicators of quality, such as: ▪ Improvement in the education/training of service providers. • Increases in wage rates. • Increases in provider-to-client ratios. • Increases in client satisfaction.	Early learning and child care should be of high quality to support optimal child development. Examples of initiatives that support high quality early learning and child care could include: • Enhancements to training and support, child/caregiver ratios and group size, compensation, recruitment and retention, physical environment, health and safety, and learning environment.
Inclusion	n/a	Early learning and child care should be inclusive of and responsive to, the needs of children with differing abilities; Aboriginal (i.e. Indian, Inuit and Métis) children; and children in various cultural and linguistic circumstances. Examples of initiatives that support inclusiveness could include: • Special needs programming and supports. • Culturally and linguistically appropriate resources and training.
Parental Choice	n/a	Early learning and child care services should provide the flexibility to respond to the varying needs and preferences of parents and children. Examples of initiatives that support parental choice could include: • Innovative approaches to service provision in rural and remote communities. • Flexible approaches that address a range of family and employment circumstances.

* In most cases, only some program indicators stipulated by each principle are available to each program/initiative. However, descriptive information is provided with respect to the indicators in the context of the program area.

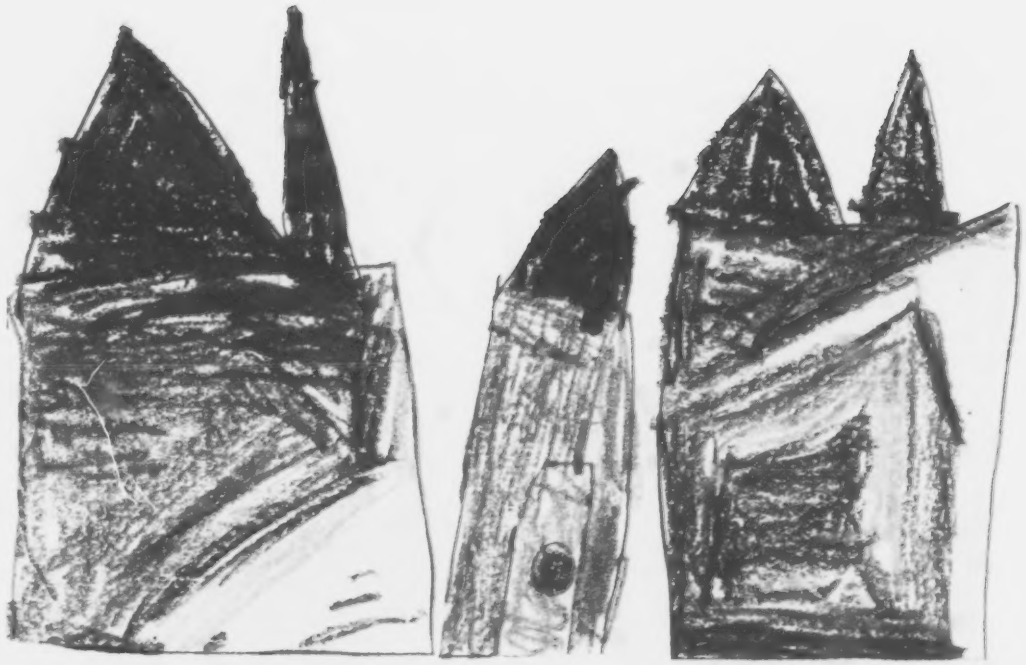
Appendices: Financial Expenditures

Appendices A, B, and C provide actual provincial and federal expenditures made as part of the Early Childhood Development Initiative (ECDI), Multilateral Framework on Early Learning and Child Care (ELCC), and Early Learning and Child Care Plan Agreement in Principle for the period April 1st 2005 – March 31, 2008.

Appendix D provides an overview of total provincial and federal expenditures in early childhood development and early learning and child care from 2000 (baseline year) through 2008.

For information on detailed expenditure summaries for 2000 - 2005, (including baseline funding) refer to the Early Childhood Development Initiative & Multilateral Framework on Early Learning and Child Care, Annual Report 2004 – 2005 (http://www.gov.ns.ca/coms/department/documents/ECD_Initiative_Report_2005.pdf.).

All expenditure summaries are provided by the Nova Scotia Department of Community Services, and all graphs and figures represent Nova Scotia's investment in the four ECD program areas as identified in the First Minister's Communiqué on Early Childhood Development (2000).



Appendix A Provincial and Federal ECD Expenditure Summary 2005–2006 (April 1, 2005 to March 31, 2006)

Program	Provincial Funding ($)	Federal Funding ECDI / ELCC ($)	Federal Funding Child Care Plan ($)	Total Actual Funding ($)
Healthy Beginnings: Enhanced Home Visiting				
Healthy Beginnings: Enhanced Home Visiting	Nova Scotia Department of Health funding of home visiting unknown due to multifaceted role	3,500,000		3,500,000
Sub-Total	**0**	**3,500,000**	**0**	**3,500,000**
Enhancing Parenting and Family Supports				
Family Resource and Parent Education	561,500	340,000		901,500
Child Care Information and Support	Federal only	650,000		650,000
Early Language and Learning	Federal only	890,000		890,000
Adoption Redesign	Federal only	831,899		831,899
Sub-Total	**561,500**	**2,711,899**	**0**	**3,273,399**
Stabilizing and Enhancing Child Care				
Stabilization Grant	Federal only	4,029,166		4,029,166
Training Initiative	Federal only	994,000		994,000
Inclusion/Differential	1,452,092	1,230,940		2,683,032
Subsidy and Equipment Grants	7,713,525	2,395,366		10,108,891
Capacity Initiative	Federal only	23,000		23,000
Other Child Care: Salary Enhancement Grant	2,892,808	Provincial only		2,892,808
*New / Expanded Child Care Centres	Federal only	93,018		93,018
Child Development Centres	291,049	Provincial only		291,049
Early Intervention	2,032,237	60,000		2,092,237
ECDS Administration	284,087	9,300		293,387
ESIA Child Care	2,580,358	2,300,000		4,880,358
Sub-Total	**17,246,156**	**11,134,790**	**0**	**28,380,946**
Community Engagement and Infrastructure Support				
ECD Regional Collaboration Teams	Federal only	3,444		3,444
Information Systems Development	Federal only	995,735		995,735
Administration and Operations	Federal only	1,668,132		1,668,132
Sub-Total	**0**	**2,667,311**	**0**	**2,667,311**
Total Expenditure	**17,807,656**	**20,014,000**	**0**	**37,821,656**

Appendix B Provincial and Federal ECD Expenditure Summary 2006–2007 (April 1, 2006 to March 31, 2007)

Program	Provincial Funding ($)	Federal Funding ECDI / ELCC ($)	Federal Funding Child Care Plan ($)	Total Actual Funding ($)
Healthy Beginnings: Enhanced Home Visiting				
Healthy Beginnings: Enhanced Home Visiting	Nova Scotia Department of Health funding of home visiting unknown due to multifaceted role	3,500,000		3,500,000
Sub-Total	**0**	**3,500,000**	**0**	**3,500,000**
Enhancing Parenting and Family Supports				
Family Resource and Parent Education	561,500	226,000		787,500
Child Care Information and Support	Federal only	650,000		650,000
Early Language and Learning	Federal only	720,000		720,000
Adoption Redesign	Federal only	928,310		928,310
Sub-Total	**561,500**	**2,524,310**	**0**	**3,085,810**
Stabilizing and Enhancing Child Care				
Stabilization Grant	Federal only	4,263,137		4,263,137
Training Initiative	Federal only	1,000,000	98,000	1,098,000
Supported Child Care (formerly Inclusion/ Differential)	1,452,092	1,253,774		2,705,866
Subsidy and Equipment Grants	7,201,572	2,577,935	342,713	10,122,220
Other Child Care: Salary Enhancement Grant				
Child Care Operating Grant (CCOG)	2,890,479		900,000	3,790,479
*New / Expanded Child Care Centres	Federal only	2,248,302		2,248,302
**Repair / Renovation Loans			46,939	
Child Development Centres	276,077			276,077
Early Intervention	2,021,359	299,010		2,320,369
ECDS Administration	328,328			328,328
ESIA Child Care	2,059,969	2,300,000		4,359,969
Sub-Total	**16,229,876**	**13,942,158**	**1,387,652**	**31,559,686**
Community Engagement and Infrastructure Support				
ECD Regional Collaboration Teams	Federal only	2,722		2,722
Information Systems Development	Federal only	686,492	520,000	1,206,492
Administration and Operations	Federal only	1,388,893	240,341	1,629,234
Sub-Total	**0**	**2,078,107**	**760,341**	**2,838,448**
Total Expenditure	**16,791,376**	**22,044,575**	**2,147,993**	**40,983,994**

Appendix C Provincial and Federal ECD Expenditure Summary 2007–2008 (April 1, 2007 to March 31, 2008)

Program	Provincial Funding ($)	Federal Funding ECDI / ELCC ($)	Federal Funding Child Care Plan ($)	Total Actual Funding ($)
Healthy Beginnings: Enhanced Home Visiting				
Healthy Beginnings: Enhanced Home Visiting	Nova Scotia Department of Health funding of home visiting unknown due to multifaceted role	3,500,000		3,500,000
Sub-Total	**0**	**3,500,000**	**0**	**3,500,000**
Enhancing Parenting and Family Supports				
Family Resource and Parent Education	561,500	206,000		767,500
Child Care Information and Support	Federal only	550,000		550,000
Early Language and Learning	Federal only	617,886		617,886
Adoption Redesign	Federal only	775,090		775,090
Sub-Total	**561,500**	**2,148,976**	**0**	**2,710,476**
Stabilizing and Enhancing Child Care				
Stabilization Grant	Federal only	4,500,000	491,090	4,991,090
Training Initiative	Federal only	800,000		800,000
Supported Child Care	1,452,092	1,441,978		2,894,070
Subsidy and Equipment Grants	7,174,308	2,634,992	1,142,000	10,951,300
Other Child Care: Child Care Operating Grant (CCOG)	2,882,579		5,406,318	8,288,897
*New / Expanded Child Care Centres	Federal only	420,820		420,820
**Repair / Renovation Loans	Federal only		839,097	
Outdoor Play Space Grants	Federal only		5,080,806	
Program Enhancement Grants	Federal only		2,621,057	
Child Development Centres	263,281			263,281
Early Intervention	2,080,812	299,010		2,379,822
ECDS Administration	423,851			423,851
ESIA Child Care	1,810,842	2,300,000		4,110,842
Sub-Total	**16,087,765**	**12,396,800**	**15,580,368**	**44,064,933**
Community Engagement and Infrastructure Support				
ECD Regional Collaboration Teams	Federal only	1,703		1,703
Information Systems Development	Federal only	423,994	1,500,000	1,923,994
Administration and Operations	Federal only	1,173,673	553,549	1,727,222
Sub-Total	**0**	**1,599,370**	**2,053,549**	**3,652,919**
Total Expenditure	**16,649,265**	**19,645,146**	**17,633,917**	**53,928,328**

Notes

***New / Expanded Child Care Centres**

In 2004, approximately $3 million was approved for the expansion of licensed child care facilities to create additional child care spaces.

Portion reported reflects the remainder of forgivable loans paid in 2007-08, as issued to approved licensed non-profit facilities this fiscal year. Repayable loans issued are NOT reported as expenditures. Total 2004 – 05 Expansion funding for forgivable loans was $2,762,140.

****Repair / Renovation Loans**

In 2007, approximately $1 million was announced for approved licensed commercial and non-profit child care centres to improve or enhance their centres. This will include funding for repairs, renovations, and improvements including energy upgrades and accessibility for children and families with identified special needs.

Portion reported reflects forgivable loans only, as issued to approved licensed non-profit facilities. Repayable loans issued are NOT reported as expenditures.

Appendix D Total Provincial and Federal ECD Expenditure Summary from 2000 (Baseline Year) to 2008

Program	2000 - 2001 Actual Baseline Funding ($)	2001 - 2002 Actual Baseline Funding ($)	2002 - 2003 Actual Baseline Funding ($)	2003 - 2004 Actual Baseline Funding ($)	2004 - 2005 Actual Baseline Funding ($)	2005 - 2006 Actual Baseline Funding ($)	2006 - 2007 Actual Baseline Funding ($)	2007 - 2008 Actual Baseline Funding ($)	**Total** Actual Funding ($)
Healthy Beginnings: Enhanced Home Visiting									
Healthy Beginnings: Enhanced Home Visiting	NS Department of Health funding of home visiting unknown due to multifaceted role of public health staff	417,430	3,582,660	3,000,000	3,494,582	3,500,000	3,500,000	3,500,000	20,994,582
Sub-Total		**417,430**	**3,582,660**	**3,000,000**	**3,494,582**	**3,500,000**	**3,500,000**	**3,500,000**	**20,994,582**
Enhanced Parenting and Family Supports									
Family Resource and Parent Education	515,500 to family resource centres only	1,079,600	1,128,000	571,500	802,500	901,500	787,500	767,500	6,553,600
Child Care Information and Support	—	—	450,000	650,000	650,000	650,000	650,000	550,000	3,600,000
Early Language and Learning	—	—	567,500	727,500	740,000	890,000	720,000	617,886	4,262,886
Adoption Redesign	—	—	24,998	174,411	349,361	831,899	928,310	775,090	3,084,069
Sub-Total	**515,500**	**1,079,600**	**2,170,498**	**2,123,411**	**2,541,861**	**3,273,399**	**3,085,810**	**2,710,476**	**17,500,555**
Stabilizing and Enhancing Child Care									
Stabilization Grant	—	3,448,122	3,646,647	3,839,403	3,896,696	4,029,166	4,263,137	4,991,090	28,114,261
Training Initiative	—	—	1,306,380	1,093,906	974,089	994,000	1,098,000	800,000	6,266,375
Supported Child Care (formerly Inclusion/ Differential)	1,308,276	1,865,388	2,503,632	2,602,829	2,428,763	2,683,032	2,705,866	2,894,070	18,991,856
Subsidy and Equipment Grants	9,094,622	9,519,259	9,345,150	9,236,554	9,288,606	10,108,891	10,122,220	10,951,300	77,666,602
Other Child Care (COGG, SEG)	2,871,569	2,854,720	2,910,897	3,090,157	3,081,892	2,892,808	3,790,479	8,288,897	29,781,419
Child Development Centres	285,216	286,301	684,605	290,917	293,418	291,049	276,077	263,281	2,670,864
Early Intervention	1,612,125	1,897,742	1,897,572	1,901,383	2,026,612	2,092,237	2,320,369	2,379,822	16,127,862
ESIA Child Care	899,591	3,174,649	5,013,506	5,177,950	5,024,092	4,880,358	4,359,969	4,110,842	32,640,957
ECDS Administration	581,368	565,279	339,964	359,395	373,705	293,387	328,328	423,851	3,265,277
New / Expanded Child Care Centres	—	—	1,679,248	—	—	93,018	2,248,302	420,820	4,441,388
*Material / Resource Grant	—	—	—	724,461	(21,944)	—	—	—	702,517
Repair / Renovation Loan	—	—	—	—	—	—	46,939	839,097	886,036
Outdoor Play Space Grant	—	—	—	—	—	—	—	5,080,806	5,080,806
Program Enhancement Grant	—	—	—	—	—	—	—	2,621,057	2,621,057
French Translation of ECD Training Materials	—	15,000	—	—	—	—	—	—	15,000
Capacity Initiative	—	—	—	—	2,152	23,000	—	—	25,152
Sub-Total	**16,652,767**	**23,626,460**	**29,327,601**	**28,316,955**	**27,368,081**	**28,380,946**	**31,559,686**	**44,064,933**	**229,297,429**
Community Engagement and Infrastructure Support									
ECD Regional Collaboration Teams	—	—	20,000	—	2,598	3,444	2,722	1,703	30,467
Information Systems Development	—	—	400,000	450,000	312,097	995,735	1,206,492	1,923,994	5,288,318
Volunteer Initiative	—	—	—	—	11,945	—	—	—	11,945
Administration and Operations	—	109,129	671,458	1,190,258	1,427,076	1,668,132	1,629,234	1,727,222	8,422,509
Sub-Total	**—**	**109,129**	**1,091,458**	**1,640,258**	**1,753,716**	**2,667,311**	**2,838,448**	**3,652,919**	**13,753,239**
Total Expenditure	**17,168,267**	**25,232,529**	**36,172,217**	**35,080,624**	**35,158,240**	**37,821,656**	**40,983,994**	**53,928,328**	**281,545,805**

Note: ECD carry forward of $4,685,200 from 2001 – 2002 to 2002 – 2003. Amounts are gross expenditures.

*Funding issued in 2003 – 2004; returned by recipients in 2004 – 2005.

NOVA SCOTIA
Community Services